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**THE EFFECT OF INTIMATE PARTNER VIOLENCE  
ON MOTHER'S PARENTING: ADULT CHILDREN'S  
VIEWS**

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requirements for the degree of**

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## **ABSTRACT**

Intimate Partner Violence (IPV) has profound impact on mothers and their relationship with their children. This study, undertaken in Australia, examined the impact of (IPV) on mothers' parenting by focussing on adult children's perspectives of their mothers who parented in an IPV environment. It is estimated that one in six women in Australia has experienced physical or sexual violence by their current or former cohabiting partners and that more than half those affected women had children at the time of the incident. These statistics sparked interest to explore how the children who grew up in this environment perceived their mothers parenting, her relationship with them and her parenting style.

Semi-structured interviews were conducted with six adult children aged between 18 and late 40s who had grown up in the context of IPV perpetuated against their mothers. All participants resided in Victoria, Australia. The interviews were voice-recorded, transcribed and thematically analysed. Thematic analysis highlighted the parenting challenges faced by mothers in the context of a violent relationship. Feminist theory and an analysis of societal patriarchy were used in this study to understand the impact of power and control over mothers and their children by fathers. Intersectionality highlighted the fact that, in addition to experiencing IPV, there were other factors that compounded on mothers' situation, namely culture beliefs and language barriers.

The study found that participants perceived that IPV had negatively impacted on their mother's parenting. The mother's ability to comfort and be emotionally present for children was affected. Participants felt they could not rely on their mothers for protection and this had affected their relationship. IPV had also impacted on mothers' parenting style as they were viewed as either being strict with their children or preoccupied with their IPV experience and leaving children to take care of themselves. Findings indicate that some children had to take

on adult roles and support their mothers. Another factor that impacted was language barriers, as mothers had limited English language which made it difficult for them to seek support. Mothers experiencing IPV had been isolated and this had impacted on their parenting as they relied more on their children and on fathers for financial support.

The adult children did, however, acknowledge their mothers' efforts in compensating for the violence they witnessed and noted their mothers' strengths and resilience as they parented them during this challenging time. Participants identified that some of their mothers had spent time with them, taking them to the shops and to the playground. This study acknowledges that IPV has an impact on mothers' parenting and therefore social workers and practitioners working with these mothers should work on changing societal beliefs about violence and men's behaviours. This study makes a contribution to understanding the impact of IPV on mothers' parenting, parenting style and mother-child relationships in Australia. The study highlights the importance of culture, language and gender in understanding IPV on mothers. Implications for policies and practices have been identified together with recommendations for future research.

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## **Chapter 1: Introduction**

Over the past decades, researchers have become interested in the impact of intimate partner violence (IPV) on mother's parenting and have argued that mothers who have experienced IPV on the whole are innovative, creative and resilient in their responses to it and are able to manage their own and their children's survival (McInnes, 2002). Researchers also argue that mothers face many challenges as victims of IPV as they are most likely to suffer from mental and physical health issues which impact on their parenting (Bancroft & Silverman, 2002; Humphreys & Thiara, 2003, WHO, 2013) and self-perception as a mother and their relationship with their children. These conclusions were reached after observing mothers who had experienced IPV interacting with their children and studying the behaviours and development of children who were parented by mothers who had been through IPV and on focussing on the mother's experiences of mothering in the context of IPV ( Alexander, MacDonald & Paton, 2005; Lapierre, 2010; Levendosky, Bogat & Martinez-Torteya, 2013; Levendosky et al.,2013; Jouriles, Norwood, McDonald & Peter, 2001).

This study undertaken in Australia examined the impact of IPV on mothers' parenting, by focussing on adult children's perspectives of their mothers who parented in an IPV environment. This introduction chapter discusses the prevalence of IPV worldwide with particular attention to the Australian statistics. The research aims are then outlined. The terms IPV and parenting are defined, reflecting the way they are used in this study, followed by an introduction to the impact of IPV on children and mothers. The researcher's interest in the topic is also explained followed by the contribution of this study to the understanding of IPV.

## **IPV Prevalence**

There is growing evidence worldwide that IPV has serious and long-lasting health consequences such as depression, anxiety, eating disorders, emotional and physical health for its victims (Mouzos & Makkai, 2004; Wadsworth, Kothari, Lubwama, Brown, & Frank Benton, 2018). The prevalence of IPV differs internationally but there is a general understanding that victims are predominately women (WHO, 2013). According to World Health Organisation (WHO) statistics, worldwide IPV affects about 30% of women who have been or are in a relationship (WHO, 2013), and a record 38% of deaths among women is due to IPV (Garcia-Moreno et al, 2013). It is generally accepted that the true extent of IPV in many countries is unknown (Mouzos & Makkai, 2004) because not all cases are reported to the police.

In Australia, the Australia Bureau Statistics (ABS) uses the Personal Safety Survey (PSS) to conduct a comprehensive quantitative study of interpersonal violence (ABS, 2016). According to the PSS conducted in 2017, one in six women in Australia had experienced physical or sexual violence by their current or former cohabiting partners (Australian Bureau of Statistics (ABS), 2017). In the same period, it was estimated that one in sixteen men had experienced physical or sexual violence (ABS, 2017). More women experience violence from the people they know while men, on the other hand, were most likely to be victims of violence from strangers in the public (Heise & Garcia Moreno, 2007).

The Australian statistics also indicate that more than half of the women affected by IPV had children in their care and that children were exposed to the violence (ABS, 2017). In 2016-2017, about 418000 women and 92200 men who had experienced IPV disclosed that they had their children in their care who had witnessed and had been exposed to the violence (ABS,2017). Worldwide, it is estimated that in 2018, up to 1 billion children aged between 2-17 years had been exposed to IPV perpetrated against their parents (WHO,2018).

## **Research Aims**

The goal of the study was to explore adult children's perspectives on how IPV perpetrated against their mothers affected her parenting.

The objectives of the research were:

1. To investigate how parenting in the context of IPV impacted mothers' abilities to meet their children's needs:
2. To understand the mother-child relationship from the perspective of adult children who were parented by a mother experiencing (IPV): - and
3. To examine how mothers parenting styles were affected by the IPV.

In this research adult children discussed their childhood experiences of growing up in an IPV environment focussing mainly on how they think their mother's parenting was affected by the violence. Adult children from the age of 18 to 45 years were selected as the participant cohort as they had the ability to reflect back on their adolescent experiences with better cognitive capacity (Haselschwerdt et al., 2019). This age range (18 to 45 years) was also considered appropriate as the individuals might have received counselling support for the IPV they were exposed to and have the freedom to express themselves.

This study was conducted in Victoria, the second most populated state of Australia. In Victoria, it is estimated that over 160,000 people experienced IPV in 2015-2016 which cost the state an estimated \$5.3billion (KPMG, 2017). In 2015, a Royal commission found that Victoria had experienced a significant increase in reported incidents of family violence which included IPV (Neave, Faulkner & Nicholson, 2016).

## **Defining IPV**

According to WHO, IPV refers to any behaviour within an intimate relationship that causes physical, psychological or sexual harm to those in a relationship (WHO, 2013). IPV also includes psychological aggression and controlling behaviour of any kind by a current or former partner. This study will, however, employ the term IPV as it concentrates mostly on the physical violence, sexual violence, stalking and psychological aggression by a current or former partner (Breiding, Basile, Smith, Black & Mahendra, 2015). This is in contrast to “domestic violence” which may refer to partner violence as well as the abuse of children and the elderly or any abuse by any family member (Hattery, 2009). The term IPV was also deemed appropriate because this study is about mothers who have experienced violence from their partners and had children in their care. This research examines the impact of IPV on mothers because, according to Bagshaw et al. (2010), mothers experience a higher rate of IPV while fathers do not report the same level of violence or feelings of fear or powerlessness as mothers do.

Cussen & Bryant (2015) reported that one woman is killed in Australia by a partner or ex-partner almost every week and that half of the women who had experienced violence by a current partner had children in their care at the time of the violence and that the children had witnessed or had been exposed to the violence. Additionally, Catalano (2012) stated that there is higher prevalence of IPV in households with women and children. Married women reported more incidents of IPV when their children were present than when they were not (Berger, Wildsmith, Manlove, & Steward-Streng, 2012). Parents who are victims of violence may try to protect their children from being exposed to the violence, but this can prove impossible as children become exposed to it in various ways. Children are exposed to the IPV through observing or overhearing the violence ranging from severe physical abuse to verbal

abuse and are also exposed to the IPV through seeing scars, bruises and damaged furniture in the house (Cunningham & Baker, 2004; Edleson, Shin & Armendariz, 2008).

### **Defining Parenting**

Parenting has been described as an act of providing for and supporting the emotional, intellectual, physical and social needs of children from infancy till adulthood (Johnson, Berdahl, Horne, Richter & Walter, 2014). LeVine (1988) concludes that irrespective of culture, parents share three goals: the health and survival of their children; teaching their children survival skills and encouraging those norms and customs that are important to their respective cultures. Although parents have certain roles in relation to their children, those roles are constantly changing from the task of caring for them to providing support for their intellectual, social and their children's psychological wellbeing (Craig, Powell & Brown, 2015). Parenting is not an easy task and though it can be a fulfilling role, it might also be demanding intellectually, emotionally and physically (Bogels, Hellemans, van Deursen, Römer, & van der Meulen, 2014). Being a parent requires one to be readily available to nurture, protect and care for their children from the time they are born (Bogels et al, 2014). Children depend on their parents to manage threats and help them regulate their stress responses and provide protection as they cannot do this on their own (Scheeringa and Zeanah, 2001). Childhood trauma or negative upbringing can disrupt children's development causing them to have difficulties in regulating their emotions thereby increasing the rate of them developing mental health issues in later life (De Bellis and Thomas, 2003). Parents are therefore faced with the task of protecting, moulding and shaping their children's lives even though IPV exposure may make that task difficult to do.

## **Impact of IPV on children**

Children growing up in the context of IPV are exposed to the violence through seeing their parent being directly abused, trying to intervene, overhearing the arguments or acts of violence and even if they are not present at the time of the incident, they may see the bruises and broken furniture in the house (Holden, 2003). Various studies conducted on the impact of IPV on children indicated that it has negative impact on their development, behaviour, and their mental wellbeing (Gewirtz & Edleson, 2007; Holmes, 2013; Saunders, 2003; Onyskiw, 2003). More on the impact of IPV on children will be discussed in the next chapter.

## **Impact of IPV on mothers**

To understand the impact of IPV on the children it is imperative to understand the impact of IPV on the children's caregivers, and in this case mothers, who parent in the context of violence. IPV has a negative impact on all its victims and with mothers it affects their parenting role as well as their perceptions of themselves as mothers and their relationship with their children (Fish, McKenzie & MacDonald, 2009). Perpetrators of violence normally target the mother and her parenting by undermining her parenting and being abusive towards her in the presence of the children (Mullender et al., 2002). This then impacts on her children's view about her.

## **The researcher's position**

My motivation to understand and research more about IPV and parenting was formed mostly by my experience of working with families affected by this phenomenon. For the past seven years I have primarily worked with mothers and fathers who have been primary carers for their children during the time they were experiencing IPV. Many of these families are no longer in abusive relationships but their children are displaying challenging behaviours and their parents are struggling to manage them and appear to be at a loss as to how their children

developed these behaviours. Some of these children display anger towards their mothers and are physically aggressive towards them. Some of the children are withdrawn and refuse to leave their mother's sides. Others are refusing to attend school and some teenagers are resorting to self-harm and self-destructive behaviour. However not all children who grew up in this environment display these challenging behaviours. Some do not seem to be affected even though their mothers are seeking support to manage their own anxieties as they struggle to cope with their IPV experiences. When working with these families I have had the opportunity to talk to some of the children who have been able to articulate their frustrations at how they felt they had been let down by their mothers. They explained that they felt their mothers should have left the father and stopped them from seeing the violence. Others disclosed that they wanted their mothers to seek support for them sooner than later while some expressed their frustration as they had felt they were the ones supporting their mothers while others talk about their mothers protecting them from their angry fathers. Hearing these stories sparked my interest and I wanted to find out if children in general, felt their mothers' parenting affected their adjustment and the way they coped in the IPV. I wanted to interview more children from that environment, especially older children who would be able to reflect on their experiences.

My interest in perceptions of parenting included how mothers from other countries struggled to find support when experiencing IPV. I found that the agency I worked for was getting more referrals from the Department of Human and Health services - Child Protection Services because newly arrived migrant mothers had, as a last resort, used physical discipline to try and manage the behaviours of their children. On further assessment, I found that they had no other supports and were not well aware of the Australian laws. These mothers struggled to find support as they did not want to use interpreters as those interpreters were linked to their communities and the mothers believed that by sharing their IPV experiences

they would be airing their lives to the public eye. The mothers preferred to suffer alone for fear of their community finding out and for fear of having their children taken away from them due to lack of knowledge about Australian laws.

Working with mothers who had recently moved to Australia made me reflect on my own culture and I wondered if mothers from my African culture understand the impact of IPV on their children. In my culture violence perpetrated by men against women especially in married couples is viewed as a normal part of gender relations (Chuma & Chazovachii, 2013). This therefore means that mothers and children remain in that relationship for longer for fear of stigmatization from the community and reprimand from the perpetrator. This had me thinking about the impact this has on mothers and their children, their parenting and the relationship. By having a discussion with children who grew up in Australia I hoped to further my own understanding of other challenges in addition to the IPV.

### **Contribution of the study**

The knowledge gained from this study will help better understand the impact of IPV on children as well as their mothers and could be drawn upon to develop appropriate service delivery to clients. The study may also help practitioners provide timely interventions for mothers who are struggling to manage their children's behaviour; targeting the way they understand, recognise, and respond to their children's needs, while living in the context of IPV.

### **Structure of the thesis**

This opening chapter has introduced the research, outlining IPV statistics, the research aims, and defining the main terms used in the research. An overview of the impact of IPV and mothers was outlined as well as the researcher's position. The second chapter will review the literature of IPV and its impact on parenting. The chapter will narrow its gaze to how

mothers' parent in the context of IPV and how this impact their children. It will also review research which investigates how children feel their mother's parenting style was affected by the IPV. This chapter will introduce the theoretical framework informing this research. The third chapter outlines the research methodology. The chapter will give the details of the research process and explain how participants were recruited. It will describe the research strategies and how the data was collected and analysed. Ethical considerations will be explained as they play an important part in the selection of this research participants and the whole research process (Fergus, 2007). The chapter will highlight the limitations of the methodology used and make recommendations of how these might be dealt with in future studies. Chapter 4 will present the research findings. The different views of the participants on their mother's parenting will be reported. Chapter 5 will discuss and analyse the research findings compared with the available literature. The sixth chapter will provide the conclusion to the study, make recommendations for future research and discuss some implications to the social work practice and policy.

## **Chapter 2: Literature review**

This study explores the effect of intimate partner violence on mothers parenting as viewed by the adult children who grew up in a violent environment. Although the literature has revealed that much work has been done on the, impact of IPV on mothering, there is very little research conducted with the adult children who grew up in the context of IPV to better understand its impact on mothers' parenting, parenting styles and mother-child relationships. This chapter reviews past research on the impact of IPV on children, impact on the mothers' parenting styles, mothers' parenting and the effect it has on the relationship between mothers and their children. The last part of the chapter focuses on the feminist theory, patriarchy and intersectionality framework informing this research.

### **Children and IPV exposure**

According to Phillips and Vandebroek (2014), IPV is experienced across all cultures, ages and socio-economic groups worldwide, but the majority of those who experience it are women and children. Many children are exposed to or witness the violence but are often not included in the IPV statistics because on numerous occasions they are not considered the primary victims and their parents usually underestimate their children's exposure to the violence occurring in the home (Brown & Endekov, 2005; Richards, 2011). Other times parents do not acknowledge their children for fear of having children removed from their care this is especially true among Australian indigenous people given the history of the government removing children in the "stolen generation" period (Humphreys 2008). However, various studies conducted on IPV internationally indicate that the infants, children and adolescents exposed to it experience serious negative psychological, emotional, social, and developmental impacts to their wellbeing (Bedi & Goddard, 2007; Hughes, Graham-Bermann & Gruber, 2001; Martin 2002).

## **Impact of IPV on Children**

Several studies on IPV indicated that in most families the violence starts when children are still young and therefore places them at a prolonged risk of negative cognitive, behavioural and emotional development outcomes (Bedi & Goddard, 2007). Infants and toddlers living in IPV environments have been found to show signs of emotional distress, regressed behaviours, sleep disturbances and separation anxiety (Hughes, Graham-Bermann & Gruber, 2001). This is corroborated by Martin (2002) who stated that the violence experienced by infants interferes with their normal development of learning how to trust. Huth-Bocks, Levendosky & Semel (2001) conducted research which examined the direct and indirect effects of violence on pre-school children's intellectual functionality with a sample of 100 women and their children aged between 3 and 5 years old. They concluded that the pre-schoolers who had witnessed IPV had more behavioural and social problems, post-traumatic stress disorder and had difficulties in developing empathy compared to those who had not witnessed the IPV. Children of this age are more dependent on their mothers for their safety and wellbeing as well as their basic needs and therefore are often with their mothers and are exposed to the violence more than any other children (Huth-Bocks et al., 2001). The fact that they could not verbalise their powerful emotions meant they manifested their emotions through having tantrums, aggression, resetting comfort and being anxious (Cunningham & Baker, 2004).

A study by Jouriles et al. (2001) suggests that children from an IPV environment are at a considerable risk of developing internalised behaviours like depression, sadness, disobedience and low self-esteem. Similarly, Bauer et al. (2006) and Emery (2011) conducted studies that concluded that school-aged children exposed to IPV had increased externalised behaviours such as aggressiveness, acting out and hyperarousal. The children used the aggression as a defense mechanism as they may lack the ability to verbalise their emotions

which might become evident through tantrums, lashing out and resisting comfort from their mothers (Cunningham & Baker, 2004).

Some studies indicate that children exposed to IPV live in constant fear and develop post-traumatic stress disorder (PTSD) (Levendosky, Bogat & Martinez-Torteya, 2013). Levendosky et al. (2013) conducted a study of children between the ages of 1-7 years old who had been exposed to IPV and found that at each period children developed signs of trauma and had PTSD symptoms which included re-experiencing the violence, avoidance and being hyperaroused. This study indicated that IPV exposure has negative consequences for children from an early age. Exposure to IPV results in children's being unable to cope with the challenges of everyday life activities including failure to gain age appropriate skills. IPV also interferes with children's normal development of trust and exploratory behaviours needed to support their autonomy development (Luthar, 2006). Adding to this, Sgarzi and McDevitt (2003) state that children may live in fear for their lives, and the lives of their siblings and their mother, and this may be accompanied by feelings of rage, humiliation and guilt, leading to them having poor self-esteem. IPV may also impact on their emotional development making it difficult for them to make and keep friends, or to be prone to causing disruptions at school which include non-attendance, lack of attention and poor school performance (Lloyd, 2018). According to Allen, Wolf, Bybee and Sullivan (2003), children exposed to IPV also develop psychosomatic symptoms such as headaches, stomach pains and asthma which impacted on their everyday lives like school attendance and the ability to form relationships with children of their own age.

Alexander, MacDonald and Paton (2005) conducted a study with school aged children who had been exposed to IPV with the aim of exploring young people's views on IPV and this was conducted through having open discussions followed by structured questions that were answered individually where the young people could give their private personal views.

Their findings indicate that most of the children felt ashamed about what was happening in their homes and kept it a secret and this had affected their social life as they had no friends and were bullied at school. The development of friendship is an important aspect for school aged children and Lundy and Grossman (2005) believe that social problems including poor social skills, are experienced by children growing up in a violent environment explaining that this made them more aggressive when challenged by their peers in the playground and were at risk of being bullied themselves (Cunningham & Baker, 2004). Lundy and Grossman's study showed that a sample of 4636 children who were exposed to IPV at home were frequently aggressive and a third of them had difficulties following school rules.

The impact of IPV on children at different developmental stages indicates the range of ways in which children react to their environment (Humphreys, 2008). Levendosky et al. (2002) after conducting research examining the impact of domestic violence and child abuse on children aged 11-16 years old, concluded that the impact of IPV goes beyond the limits of the family and affects how children formed healthy relationships with their peers due to the lack of good role models at home. Their research suggested that adolescents exposed to IPV were less likely to have secure attachment, lacked trust in their relationships and were at high risk of being violent in their own relationships in adulthood.

Children exposed to IPV may commonly find themselves thrown into huge responsibilities in their lives. Fortin and Lachance (2011) conducted a study with 117 mothers who had been victims of IPV with their children aged between 8 and 12 years old and found that apart from blaming themselves for the abuse mothers became more psychologically stressed leaving their children to take care of themselves. Children assumed responsibilities within their family homes particularly if mothers became unable to care for them due to injuries and emotional dysfunction caused by the abuse (Fortin and Lachance, 2011). Children in these situations become isolated due to age inappropriate activities (Troon,

2014). Parentification impacts on the children's social adjustments with peers and may affect their school attendance as they might stay at home to offer support to their mother (Earley & Cushway, 2002).

The above suggests that children are negatively impacted by their exposure to IPV but there are several factors that can protect the children from these negative outcomes. One of these protective factors is having a trusted person to confide in and, forming a positive relationship with other adults (Margolin & Gordis, 2000). This highlights the importance of children having a supportive relationship with the non-abusive parent, usually the mother (Troon, 2014). A good mother- child relationship provides stability for the children growing up in an IPV environment (Bancroft et al., 2012; Howell & Graham-Bermann, 2011). It is therefore important to understand the effects of IPV on mothers' psychological functioning and maternal response to their children's needs to be able to understand their needs and provide appropriate treatment (Burr, 2014).

### **Impact of IPV on mothers' parenting**

While both men and women can provide the physical, social and emotional needs of children, the primary responsibility of caring for children in many parts of the world is, however placed on women (Fish, McKenzie & MacDonald, 2009). The role of motherhood is a significant social and cultural identity associated with women because they predominantly do the parenting role (Arendell, 2000). Parenting includes supporting children's physical and emotional health from birth to adulthood and involves providing physical and emotional care, taking care of them when unwell, setting boundaries and routines, behavioural management and improving the child's potential (Mares, Newman & Warren, 2011). Good parenting requires the ability to reflect on the thoughts, feelings and intentions of the child and to adequately communicate and respond to their needs (Camoirano, 2017). Mothers therefore

need to be in a positive space of mind to be able to fully provide, protect and supervise their children.

In the context of IPV, men tend to target the mothers' parenting which makes it difficult for her to care and provide for her children (Mullender et al, 2002; Radford & Hester, 2006). Men use control and domination to exercise their expression of power and authority over their partners with the intention of undermining their parenting (Lapierre, 2008). IPV experience then has an impact on the mothers' wellbeing and how she responds to her children. Adkins & Kamp Dush (2010) conducted a study which concluded that mothers who had experienced IPV had reported having poor mental health and exhibited higher levels of anxiety regardless of whether they had separated from the abusive partner or not. This had impacted on the way they viewed themselves and how they parented their children. Levendosky and German-Bermann (2001) stated that mother's psychological functioning and positive parenting were the most significant predictors in a child's adjustment. Levendosky & German-Bermann (2001) made this conclusion after conducting a research with 120 women and their children aged between 7 and 12 years who had been living in a domestic violence shelter. They found that though mothers could adequately parent their children, changes in their mood and affect caused their children to be concerned more about them instead of the other way around. Children need to have a good relationship with their mother to be emotionally stable in their lives and in their future relationships (Gordon, 2015). IPV was found to be associated with poor physical and mental health which put parenting stress on the mothers as they suffered from physical fatigue and impaired cognitive function (Dillon, Hussain, Loxton, Rahman, 2013). This therefore made it difficult for them to be emotionally and physically present to attend to their children's needs.

Studies suggesting that abused mothers who experienced depression, anxiety, psychological dysfunction and post-traumatic stress disorders (PTSD) because of IPV, state

that mothers had difficulty attending to their children needs, providing maternal warmth, nurturing, and being a supportive parent (Haight, Shim, Linn & Swinford., 2007; Holden, Stein, Ritchie, Harris, & Jouriles, 1998; Levendosky & Graham-Bermann, 2001; Levendosky, Leahy, Bogat, Davidson, & von Eye, 2006). Mothers experiencing PTSD live in constant fear and helplessness and may develop symptoms of depression and overwhelming anxiety which can alter their parenting capabilities (Appleyard & Osofsky, 2003). Mothers who live in constant fear may end up denying their children a normal sense of life which might impact on their children's sense of trust and security, a foundation for healthy emotional development (Levendosky et al., 2000; Levendosky & Graham- Bermann, 2001).

IPV has an impact on a mother's motivation to interact with her children.

Levendosky et al. (2000) conducted a study with mothers who parented in the context of IPV and found that 20 percent of the participants disclosed that IPV had a negative impact on their parenting in that they had no energy for their children. Mothers in that study explained that they did not have any motivation to spend time with their children and were not interested in their children's social and emotional development. This response was consistent with Herman's (1992) theory of trauma which when related to violence says that trauma reduces the mother's energy for other people in their lives resulting in them getting angry with their children culminating in them hitting their children as a reaction to them being hit by their partners. A number of studies concurred that abused mothers tend to use inappropriate disciplinary methods more than other mothers (Levendosky et al., 2000; Radford and Hester, 2001).

Some mothers in an IPV environment might fail to balance their responsibilities in relation to their children thereby losing control of their parenting role and may try to be "good mothers", by putting their children first and exercising leniency resulting in them providing less positive discipline regimes (Lapierre, 2010). They may also become less

consistent in their parenting styles as well as being less nurturing than those mothers who have not been in abusive relationships (Lapierre, 2010). This indicates that mothers struggle to parent in the context of IPV.

### **Impact on mothers' parenting styles**

The concept of parenting styles has been used by different researchers to understand how parents' behaviour and attitude impacts on their children's development (Bhugun, 2016). According to Fletcher, Walls, Cook, Madison, and Bridges (2008), parenting styles can be best explained in terms of two components such as responsiveness and demandingness: demandingness looks at the extent at which parents set boundaries for their children. Parental responsiveness was explained as being the way parents support their children and attend to their needs. Baurimand (1971) explained this parental influence on children as parenting styles. Her research proposed four basic elements that explained the terms responsiveness and demandingness. According to Baurimand (1971), responsiveness was associated with the authoritative parenting style where parents raise their children in a warm and affectionate environment and have high autonomy to allow for positive growth in children. Authoritative parents were described as those who try and control their children's activities by making logical demands, setting limits while remaining as loving, understanding and listening to their children's views at the same time. This parenting style was found to be useful during times of uncertainty and stress as it helped to calm the children's fears and maintained structure during unpredictable times (Kochanska & Aksan, 2006). Although IPV may make it difficult for the mother to remain calm and attuned to her children's needs, by adopting the authoritative parenting style mothers help to maintain a good relationship with their children as they will learn to trust her demands.

Authoritarian parenting style was associated with demandingness which included strict parents, who gave their children less autonomy (Baurimand, 1971). Parents using this style are very demanding of their children but very unresponsive to their needs and requests. Children are expected to accept the adults' demands without questioning their motives and their parents may use commands, threats and physical force to get the children to do what they expect them to do. Children do not experience love and warmth and do not have the ability to express their feelings and views or to make decisions about what is best for them (Zupancic et al, 2004). Parents using this style feel they must stay in control all the time and would set rules to be followed all the time. In an IPV environment mothers may use this parenting style whereby they engage in non-reasoning or directive parenting with their children so as to protect themselves and the children from the abuser (Rea & Rossman, 2005). Children may be directed to sit still in their rooms and not make noise which can be another way of adapting in this environment.

The other parenting style, permissive style is where parents give resources and the responsibility to their children to regulate and shape their own behaviour as much as possible (Baurimand, 1971). Parents utilising this parenting style do not guide their children but give them as much freedom as possible as long as their children are not at risk of harm (Rossman & Rea, 2005). Permissive parents do not use proper discipline methods to help manage in appropriate behaviours and children determine their own activities (Rea & Rossman, 2005). Children in an IPV environment may find themselves looking after each other and having less or no supervision at all from their mothers who might have minimal oversight and could be viewed as neglectful parents (Rodriguez, 2010). Baurimand concluded that children with permissive parents had low independence, and those with authoritarian parents had low achievement and average social skills while those with authoritative parents had good achievement, independence and improved social skills (Baurimand, 1971).

Maccoby and Martin (1983) introduced a fourth parenting style which they termed neglectful. Parents utilising this parenting style are considered to be low in warmth, firmness and restrictiveness. Parents are known to minimise their interactions with their children, ignoring their child's whereabouts, daily activities and social networks, as they are more concerned about their own needs to the detriment of their children's development (Maccoby & Martin, 1983).

Although parenting plays an important role in the children's lives, it often does not occur in a vacuum as it may be affected by a number of complex factors such as their children's intellectual, social and emotional wellbeing (Kolar & Soriano, 2000). Parents often take care of their children under a lot of stress and this affects their parenting skills and behaviours (DiLillo & Damashek, 2003). According to Levendosky and Graham-Bermann (2001), parenting skills affect parent-child relationships and parenting patterns which then affects the children's social, psychological and emotional adjustments. Among the different factors that may affect parenting, IPV impacts on the parent's ability to build a good relationship with their children and it may have a negative impact on the mothers who are societally considered to be primary caregivers of the children in the family (Craig, 2002). A number of researchers have reported that IPV against women creates stress in their parenting and negatively impacts on their parenting behaviours leading to reduced emotional levels to be able to attend to their children's needs (Levendosky & Graham-Bermann, 2001; Kitzmann, Gaylord, Holt & Kenny, 2000; Lapierre, 2010, Wendt, Buchanan & Moulding, 2015). There has however been recent literature that has focused on the strengths of these mothers who parent in this challenging environment which identified that not all mothers who parent in IPV had been negatively affected (Casanueva, Martin, Runyan, Barth, & Bradley, 2008; Lapierre, 2010, Letourneau, Fedick & Willms, 2007; Rossman & Rea, 2005). These researchers gave examples of how mothers despite their challenging

circumstances, had been able to remain attentive, affectionate and protective towards their children. What has been apparent, however, has been that the impact of IPV on the mother's parenting has an impact on their children.

### **No impact on parenting and parenting styles**

Although there have been studies indicating that IPV has significant impacts on mothers' feelings and behaviour towards their children, there have also been studies which have focused on the mother's strengths and capabilities (Lapierre, 2010; Wendt, Buchanan and Moulding, 2015). It should not be assumed, therefore, that being victims automatically diminishes a mother's parenting abilities (Wendt & Zannettino, 2014). Compared with other mothers, abused mothers were found to be equally able to form positive attachments with their children and were emotionally and physically available (Holden et al, 1998; Letourneau et al, 2007; Levendosky et al., 2003; Sullivan, Nguyen, Allen, Bybee & Juras, 2000).

Lapierre (2010) interviewed women in the UK who had experienced mothering in the context of IPV and explored the challenges and difficulties they had faced in relation to parenting. He reported that the participants aimed at "good mothering" and they did this by putting their children first and "often had to juggle their children's needs" (Lapierre, 2010, p. 349) with those of the abusive partner. The mothers also tried to respond to their children's emotional needs by talking to them about the violence in a way they could understand after witnessing the violence and not leaving them alone with the abuser. Kelly (2009) conducted research which revealed that mothers modified their parenting role and strove to prioritise, protect, and provide for the children the best way they could. The participants made considerable attempts to parent well, by putting their children in another room or sending them to their neighbours' house when the abuser was yelling or being violent, calling the police and obtaining restraining orders.

According to Sullivan et al. (2000), after conducting a research in two domestic violence shelters and interviewing mothers with children aged between 7 and 11 years old concluded that mothers who had experienced IPV had lower levels of parenting stress and enjoyed being parents. Children in that research were interviewed as well, and they reported that their mothers had not been aggressive towards them. There was evidence that the mothers tried, instead, to compensate for the negative effects of violence their children were exposed to by being sincere and nurturing towards them with children explaining that the mothers were interested in what they had to say and how they felt about the violence they had been exposed to.

A mother's decision to stay or leave a violent relationship often depends on what she thinks would be in the best interest of her children. According to Edleson, Mbilinyi, Beeman and Hagemester (2003), mothers' determination to protect their children was a strong motivator for leaving a relationship but then others stayed as they believed that it would be safer for their children if they did. Mothers had to weigh the risks their separation would have in their lives. There are studies that have indicated that the violence could continue after separation and that separation raised the risks for the mother and the children as a large number of mothers and children have been killed or injured after the separation (Humphreys & Thiara, 2011). The findings in these studies correlated with Kelly's (2009) research where participants indicated that their role in an IPV environment was to protect the children. The findings from these three studies concluded that the mother's source of suffering was not the abuse or threats she endured but she was mostly concerned about the impact of the violence on her children. Further, mothers often struggled with the idea of leaving or staying in the relationship, their desire being to keep the family intact and the fear of provoking the father's anger.

## **IPV experiences by adult children**

The above studies were conducted by interviewing mothers about their parenting experiences and some involved asking mothers about their children's experiences of IPV. A small number of studies have examined adult children's experiences and memories of growing up in domestic violence (O'Brien, Cohen, Pooley & Taylor, 2013). O'Brien et al.'s (2013) study utilised a mixed case study and consensual qualitative research design to present a detailed recollection of memories of six female children who were exposed to IPV in Australia. The participants were aged between 18 and 40 years old and had witnessed incidents of violence towards their mothers/stepmothers some time in their lifetime as children. The participants recalled their mothers providing them with all their basic needs but not spending time or listening to them. Some of the participants stated that they had sided with their mothers during the abuse and tried to stop their father from hurting their mother, but this had not stopped them from being resentful and angry towards their mother as they needed her to be more protective of them and provide them with emotional support.

Another study conducted with adult children who had been exposed to IPV explored the factors of resilience (Jenney, Alaggia & Niepage, 2015). Using qualitative methodology, the authors interviewed 12 participants aged between 18 and 47 years old about their experiences of being exposed to IPV in childhood and found that factors that built resilience in children included positive caregiving, social support and community. The participants in that study talked about their mothers' protection and support. With this in mind, this current study examines mothers' parenting through adult children's perspectives.

The literature review above indicates that the mothers' parenting was impacted by IPV. Mothers had experienced IPV from their male partners who expressed their authority and power on them and their children (Dobash & Dobash, 1979). At the same time, not all

mothers who had experienced IPV had been negatively impacted which indicate that IPV is experienced differently by women holding different statuses which may include other factors like age, gender, socioeconomic class, physical and mental ability. In this research an attempt has been made to understand IPV through feminism, patriarchy and intersectionality to be able to appreciate how it impacts on mothers.

## **Theoretical Framework**

### **Feminism**

Feminism has helped to revolutionise and increase awareness of violence against women (Dutton & Nicholls, 2005). Watkins (2000) attributes male violence against women in intimate relationships as one of the most deliberate acts of hierarchical rule and coercion. Hanmer and Itzin (2000) associates IPV with the social control of mothers by men who abuse them and one of feminism's main contribution to policy and understanding of IPV has been to identify men as perpetrators.

Feminism, an ideology becoming more prominent since the 1970s, advocates for gender equality and the empowerment women (Chesler, 2005; Walker, 2006). Feminism has been responsible for highlighting the abuse of women, for establishing safe homes and shelters, and for making changes in the legal system to ensure that violence against women is a criminal offence (Mcphail, Busch, Kulkarni and Pace,2007). Feminist writers Dobash and Dobash (1979) state that in IPV “men who assault women are actually living up to the cultural beliefs that are valued and upheld in the Western society which include aggressiveness, male dominance, female subordination - and that men use physical force as a means to enforce their dominance” (p. 24). Thirty years later it would appear that cultural awareness is shifting and there is more awareness of gender equality and personal rights. IPV

is understood to be a gendered issue and an expression of social power that has been used by men to control and dominate their partners (Rakovec-Felser, 2014).

With this belief in mind, feminism has explained why and how women remain in abusive relationships in terms of the cycle of violence (Ali & Naylor, 2013). The cycle of violence, also known as the vortex of violence, explains how women get drawn back in their partner's behaviour time and time again (Walker, 2006). Walker describes how the violent partner may be apologetic and loving after a violent incident promising never to do it again only to repeat the same violence after a few days. Learned helplessness is another situation that develops in an IPV relationship. The woman learns that despite repeated but failed attempts to challenge and stop the violence, she cannot change her situation (Walker, 2006). Trying to do so only makes the situation worse. The idea of learned helplessness acknowledges that women remain in the abusive relationship not only because they are afraid of the abuser's retaliation but also because of their inability to financially support themselves and their children. The women therefore lose control, depend on their male partners and have poor problem-solving skills (Renner & Slack, 2006).

Graham, Rawlings and Rigsby (1994) hypothesized that abusers' physical and/or psychological threats to women's survival creates a situation where women see themselves as hostages and see their abusers as abductors who are unchallengeable and unavoidable. Often times women would be so isolated and living in an environment of threat and abuse that they adjust to their environment for survival (Anderson et al., 2003). In time, women may see their partners as concurrently threatening their survival and as their only source of support which results in them forming a traumatic bond with them (Graham et al., 1994). This means that at times during the abuse, women may focus on trying to prompt love and attention from their abusive partners as a way of survival but at the same time this may stop them from recognising that they are being abused and hence lose the ability to act against the violence

(Levendosky et al., 2000). IPV also causes trauma to women which can create a state of constant alertness and hyperarousal that may lead to irritability and exhaustion (Levendosky et al., 2000).

Feminism identifies and empowers marginalised, powerless and oppressed groups and acknowledges that women have been oppressed in a patriarchal society (Zosky, 2011). Feminism also sees the root cause of violence against women as an outcome of living in a society that maintains male domination (Tracy, 2007). As such, from this feminist perspective, this research also considers the contribution of patriarchy to the understanding of the impact of IPV on mothers' parenting, parenting styles and mother-child relationship.

### **Patriarchy**

Patriarchy describes men's systematic domination of women (Pease, 2000) and is characterised by a value and belief system that approves male dominance where, in private, a man will exercise power over every other family member (Haj-Yahia & Schiff, 2007) but in public there is equal power between both women and men. Feminist theory argues that patriarchal structures promote hierarchy in the home, putting the males a superior position when compared to women and children (Haj-Yahia & Schiff, 2007). Feminists use patriarchy to explain IPV and argue that violence by men is a form of social control of women and that there are patriarchal prejudices in structures of the society like the welfare system and labour market and societal roles that seem to favour men which make some women unable to leave their abusive relationships.

During IPV, women's mothering is also targeted which demonstrates that IPV is double-edged as the violence against mothers might affect children or the mother-child relationship (Damante et al, 2008). Therefore, this shows that IPV against the mother cannot be fully understood without situating it within the broader context of patriarchal family

structure which disempowers mothers (Dekel et al, 2018). It is important to note here that feminism acknowledges that women/mothers can also perpetrate IPV but maintain that they are violent in reaction to the oppression and victimisation they are exposed to (Dekel et al., 2018). Mothers are sometimes abused in front of their children which is disempowering and may compromise their role as mothers as IPV affects all aspects of their lives like physical and mental health. This then makes it difficult for them to perform their motherly duties (Damant et al.2008). Mullender et al. (2002) pointed out that by being violent toward mothers, men attack the mothers' identity as a parent, which affects her abilities to parent their children.

### **Intersectionality**

In conjunction with feminist views, intersectionality explains that to fully understand violence against women one has to consider all the different dimensions of their lives which include socioeconomic, status, age, gender, race as well as other cultural differences experienced by immigrants (Crenshaw, 1994; Sokoloff & Dupont, 2005). With 49% of its population either born overseas or having one or both parents from overseas, Australia is considered one of the most multicultural countries in the world (ABS, 2016) there is a need to look at the intersectionality in understanding how IPV impacts on its victims as this might be compounded by different forms of marginalisation (Mitra-Kahn, Newbiggin, Hardefeldt, 2016). Intersectionality is a way of understanding the “diversity and multiplicity of the experiences of women of colour in terms of identity, social location, and structural barriers that are based on multiple forms of oppression” (Mehrotra, 2010, p. 420).

Intersectionality acknowledges that women or mothers in this society have various, layered identities “derived from their biological inheritance, social relations as well as societal power structure” (Lockhart and Danis, 2011, p 17). Intersectionality arose from

feminism and was centred on women and children who, when it came to violence, had less power (Lockart and Danis, 2011). Crenshaw (1994) was the first to come up with the concept of intersectionality to explain the reality of abused women experiencing other kinds of oppression which included but were not limited to gender, race, sexuality, culture and religion. When applied to IPV, intersectionality indicates that the violence against women is often times shaped by their identities, which include their sexual orientation, class, ethnicity, religion, language and education (Creek & Dunn, 2011). In Australia, immigrant women face a lot of challenges in addition to IPV for instance, immigrant women are sometimes economically dependent on their abusive partners and may have limited language skills which might make it difficult for them to seek support (Ghafournia, 2011). Women experiencing IPV may face many obstacles in trying to leave their violent partners, but it is worse for women who recently moved to a country as they may be socially isolated (Carline & Eastal, 2014). Intersectionality approach, therefore, helps to understand that there are complex ways mothers are disempowered besides IPV and gender.

Whilst women are vulnerable to violence it is how these women are viewed and judged by others that differs in their treatment and this may depend on whether they are white or black, straight or lesbian, citizen or an immigrant in a country (Bograd, 2005). Lockhart and Mitchell (2010) suggest that failure to understand the woman's lived experience from within a holistic framework may result in significant consequences for those women who are already marginalised and judged. Intersectionality therefore informed this research by providing a framework for explaining how IPV impacts on mothers.

Feminism has contributed to the awareness of gender imbalance in IPV and has exposed the societal sanctions and gender oppression caused by patriarchy. However, intersectionality highlights the interconnectedness of the inequalities of race, gender, class

and culture that that helps in exploring the broader contexts of IPV and its impact on parenting (Baird, Alaggia & Jenney, 2019).

## **Summary**

Various studies have been conducted on the impact of IPV on mother's parenting but few of them have explored this topic from the perspectives of adult children who had grown up in this environment. William, Boggess and Carter (2001) argued that adult children's perspective can give significant insights into the effect of IPV on parenting as they are able to give thought to what could have helped them cope and what they needed mostly from their mothers at the time. Understanding the impact of IPV on the mothers' parenting will assist in developing programs to support mothers and children cope with their experiences.

This literature review indicated that several studies were conducted focussing on women's experiences of mothering in the context of IPV from the mother's perspectives (Buchbinder, 2004; Kelly, 2009; Lapierre, 2010, Levendosky & Graham-Bermann, 2000; Peled & Gil, 2011) and few from the young children's perspectives (Alexander, MacDonald & Paton, 2005). These studies show that motherhood of mothers who have been abused was a complex issue however it is important to understand how their parenting was affected through the eyes of the adult children.

The following chapter discusses the methodology that underpinned this study. It also presents the details of the research method used to achieve the above aims, issues of ethics and how the research was conducted.

## **Chapter 3: Methodology**

The aim of this study was to explore adult children's perspectives on how IPV perpetrated against their mothers affected her parenting. The study was undertaken in Victoria, one of the Australian states. This chapter outlines the methodology used in this study, detailing the research design, data collection method, recruitment of participants, interview processes and the analysis of the data. The ethical considerations, research rigour and limitations of the study will be discussed.

### **Research design**

A qualitative methodology was used in this study to explore and describe the mothers' parenting as experienced by adult children who had grown up in an IPV environment. A qualitative methodology was used as this was an exploratory research which allowed the participants to explain themselves so as to provide an insight into the topic discussed. In comparison the aim of quantitative methodology is to measure using numbers and to quantify the variation of a situation and the focus is often narrow and the purpose is to test a hypothesis (Gilbert, 2008; Kumar, 2011). A qualitative methodology is useful in exploring changes or conflict in a society and its basis lies in interpretive approach and how participants define and describe their lived experiences (Kelly, 2009). The interpretive approach was used in this study as the researcher was interested in the individual participant's experiences (Thorne, Kirkham & MacDonald-Emes, 1997) as they had all lived different lives. With the interpretive approach, meanings are derived from the participants experiences and actions in relation to the social context which relates well with qualitative methodology (Tolley, Ulin, Mack, Robinson & Succop, 2016). Qualitative methodology therefore aligns with the interpretive paradigm as it allows participants to describe in their own words their experiences therefore allowing a rich and in-depth understanding of their perspectives

(Sheppard, 2004). Gagliardi and Dobrow (2011) add that qualitative research methods allow for complex issues to be studied thereby producing a rich data on insights, principles, experiences and behaviours to create a full understanding of a social problem and finding ways of how to deal with it. A qualitative methodology was considered appropriate for this research as it acknowledges that individuals may derive different meanings, experiences, opinions and perspectives from similar experiences (Willig, 2013).

By using the qualitative methodology, one uses the inductive approach to articulate theories from the data collected and from analysing the data, themes and categories are deduced which result in an in-depth understanding of participants experiences (Kumar, 2019). In quantitative methodology however a deductive approach is drawn upon and the aim is explained and predicted as opposed to the exploring of a phenomenon. Close-ended surveys are often used to collect the data (Kumar, 2019).

Tracy (2013) states that qualitative methodology asks what something is, in terms of how it is lived and asks questions that address the ‘What?’ and the ‘How?’. These types of questions were used for this study when exploring the experiences of the adult’s mother’s parenting in the context of IPV. For example, participants were asked about what they saw in terms of the violence and how their mother’s parenting was impacted. Additionally, qualitative methodology is interested in people’s circumstances and everyday lives and addresses questions of how they understand themselves (Tracy, 2013). To achieve this, the reliability of the qualitative study is enhanced by selecting suitable participants and having confidence in the questions asked (Tracy, 2013). The insights gained from interviewing the adult children may provide social workers with ideas on what programs could be helpful to mothers and children experiencing IPV.

By using qualitative methodology, the researcher was able to understand how the participants interpreted their experiences and analysed the words they use to describe their experiences (Merriam & Tisdell, 2015). Qualitative methodology assumes that there is more than one way of understanding reality and that by doing research, researchers are seeking to understand the participants “lived” experiences as they are “played out in a particular place and time” (Tolley et al., 2016, p. 40). This is possible through examining the topic with those who would have experienced the phenomenon (Tolley et al., 2016). By using qualitative methodology and aligning it with interpretive approach, the researcher was able to see how the participants built their different accounts.

### **Data collection**

This study utilised semi-structured interviews which allowed the researcher to ask a series of open-ended questions based on the topic under study and the areas which the researcher wanted to cover (DiCicco-Bloom & Crabtree, 2006). Semi-structured interviews were appropriate for this study as they allowed the researcher to have a set of pre-determined open-ended questions with follow up questions used to elicit further information from the participants (Di-Cicco Bloom & Crabtree, 2006). This meant that the researcher could re-phrase the questions according to each participant’s needs, ask additional questions to clarify and request additional information as seen appropriate. The questions for the interview were guided by the research aims and were written in a clear and non-leading way (DeJonckheere & Vaughn, 2019). The language was easy to understand. The interview schedule started with a general question about the participant’s family composition to help them to feel comfortable before moving on to the questions about IPV (Appendix A). The researcher had to redirect some of the participants’ attention and emphasise that this study was about how the IPV affected their mothers parenting because some of them wanted to talk about how the abuse affected them and how witnessing the IPV affected their lives as they were growing up.

When conducting the interviews, the researcher had other questions that helped to build rapport with the participants. These questions were included at the beginning of the interview in order to establish an atmosphere where the participants felt comfortable enough to disclose their personal stories (Glense, 1989). Building rapport was easy to do with these participants as they seemed interested in the topic of IPV and had more stories to tell about their experiences and those of their other family members who had been impacted.

Qualitative researchers must start a rapport-building exercise from the first time they meet their participants to build a research relationship that would allow the participants to open up to them about their lives (Dickson-Swift, James, Kippen & Liamputtong, 2007). According to Bartkowiak (2012), good communication is very essential in qualitative methodology as it creates a relationship of trust and mutual understanding. Open communication, getting to know about their family composition and their current living situation were used in building rapport with the participants. Self-disclosure was used to a limited extent. For example, the researcher disclosed that she herself had recently moved to Australia and had struggled to learn the Australian culture and so she had an idea of what struggles their families had been through as Australian immigrants. This disclosure was only made to facilitate client disclosure and to establish trust with two participants who were struggling to open up initially about their families' experiences because they were immigrants and their parents had struggled to resettle in Australia. The researcher decided that building rapport with the participants was a necessary condition to ensure the validity or trustworthiness of the research (Pitts & Miller-Day, 2007) as the participants would be open and truthful when discussing their experiences.

## **Recruitment of participants**

When conducting qualitative methodology research, the researcher has to ensure that the participants chosen have the experience of the phenomenon or have a clear understanding of what is being studied (Cleary, Horsfall & Hayter, 2014). It is also important to determine before the study how extensive the data collection will be, and the number of the participants selected will depend on what the study is about and the purpose of the study (Patton, 1990). Adult children were chosen for this study as they were assessed as being able to provide a rich, dense and focused information (Walsh & Downe, 2006) on their experiences of being mothered in the context of IPV and to provide a convincing account of their mothers' parenting. The participants were selected as they had lived through their parents' IPV and would have been able to think back about their experiences.

The following criteria was used to select the participants:

1. Male and female adults aged between 18 and 45 years who had experienced IPV during childhood and had witnessed their mothers being abused by their mothers' partners or ex-partners.
2. The adults who are currently not in an abusive relationship and are not living with an abusive parent.
3. Participants live in the Melbourne Suburbs of the State of Victoria, Australia.
4. Participants had received or were receiving support for their IPV exposure either from family members or professionals.

The plan was to purposefully select participants who fitted the above criteria by placing notices at the local family support services that had services for young adults and

families and talking to the project coordinators to assist with the recruitment through verbal advertisement, but this was not the case. Firstly, a letter requesting consent to advertise for participants was sent to the services (Appendix B) and permission gained from these services before the flyers/ notices were put on their noticeboards (Appendix C). Interested participants were asked to contact the researcher through email, text messaging and phone call. The identified participants after contacting the researcher through emails and text messages were each sent the information sheet (Appendix D) which outlined the research process to ensure that they make an informed decision about whether to take part in the research or not (Hardwick & Worsley, 2010).

Only two people who met the above criteria responded to the advertisements sent to the different services and so the researcher used the contingency plan and was able to get the required number of participants. The contingency plan was to use the snowball sampling if there were few participants responding whereby the researcher would ask those who had met the criteria to talk to anyone, they knew who might be interested in participating and fitted the above criteria (O'Leary, 2014). Initially the researcher was looking for participants from the Melbourne Eastern Suburbs, but with the snowballing sampling participants were accepted from other parts of Melbourne. The initial two people who had responded to the advertisements each introduced a new person who fitted the criteria to the researcher who then sent them the information sheet to read and think about taking part in the research study. The same process was used to get two more participants who fitted the criteria and they were all given information sheets to read and consider taking part. Six participants were interviewed.

## **The interview processes**

After selecting the participants, the researcher met with them and went over all the research documents which included the information sheet, consent forms (Appendix E) and the release of transcripts form (Appendix F) answering all questions they had and explaining that their participation was entirely voluntary and that they could withdraw from the process any time before the data analysis stage without prejudice. None of the participants withdrew from the study. The researcher also assured them that the data would be fully de-identified (O'Brien, Cohen, Pooley, & Taylor, 2013) to preserve their anonymity. The participants signed the consent forms before the instigation of the interviews. They were able to retain a copy for their own future reference.

Four interviews were conducted face to face at the researcher's workplace as the participants had identified feeling safe and secure there (World Health Organisation, (WHO), 2001). The researcher had disclosed her workplace to assess for any conflict of interest with the participants and participants came from the other parts of Melbourne outside of the researcher's catchment. The researcher's first choice of where to conduct the interviews should be at the participant's chosen place; for comfort, convenience, and safety (Smith, Flowers & Larkin 2009). The researcher gave the participants the choice of where they wanted to be interviewed and they chose the researcher's office. The researcher paid for the participants transportation to and from the workplace. Two of the participants decided to do Skype interviews. The researcher organised initial skype interviews to explain the interview forms and gave the participants equal chance as the face-to-face participants to read the information sheet and ask their questions. The two participants then emailed their signed forms to the researcher before the interviews were conducted. The skype interviews were conducted at the time chosen by the participants and participants were in the comfort of their own homes. This was acceptable because according to Peters and Halcomb (2015) Skype

offers flexibility in terms of time and location as participants could do the interviews in their homes at a time suitable to them and it ensured them privacy and they were less likely to be distracted or overheard by other people. Skype interviews offered security to the researcher as there was no traveling to unfamiliar locations to conduct interviews. All the interviews lasted between 30 minutes and fifty minutes.

At the end of the interviews the participants were given a chance to re-visit some questions to see if they wanted to add or withdraw any statements they had made. The researcher did not rush the participants to give their answers but was comfortable with the silence and allowed the participant to reflect on the issues discussed (Pietkiewicz & Smith, 2014). The researcher was mindful of the participants verbal and non-verbal cues for signs of anxiety and emotional distress, because this was a sensitive topic which could trigger some underlying experience, was ready to stop the interview and refer the person for support if necessary (WHO, 2001). This however was not necessary. Throughout the interview the researcher used probing and prompting questions to allow the participants to elaborate on what they meant and to elicit as much information as possible (Braun & Clarke, 2013). The interviews ended with the researcher asking the participants if they had any other questions or comments about the research. All interviews ended on a positive note for participants and they were compensated for their participation as agreed in the university ethics application.

During the interviews the researcher, with the participants' consent, audio recorded the interviews (Willig, 2013). The participants had the opportunity to have the recorders turned off if they did not want some of their experience recorded. This was not required during all six interviews. According to Sammut Scerri (2015), voice recording enables the researcher to be completely involved in the interview instead of concentrating on taking notes. The researcher, however, wrote down notes to record the non-verbal aspects of the

interview and questions for further clarification (Schwandt, 2015). The researcher then transcribed all the interviews after the interview process.

All the interviews were transcribed by the researcher so as to familiarise herself with the data and to consider the themes arising from participants' conversation. All identifying details were removed to maintain privacy and confidentiality of the participants. The interviews were transcribed as soon as the interviews were over, when the information was still fresh in the researcher's mind as Braun & Clarke (2013) proposes that this helps with the accuracy of the information collected. The transcripts were then returned to the participants to verify accuracy, correct errors or inaccuracies and provide clarification (Hagens, Dobrow & Chafe, 2009), and then returned to the researcher. Returning the transcripts to the participants was beneficial in this instance as one participant edited, clarified and added new material to their interviews after further reflection. In this case one participant edited the transcript and added more information about the mother's parenting style which was helpful during data analysis.

## **Data Analysis**

The aim of the data analysis was to interpret the data collected and the subsequent themes that were identified (Sergeant, 2012) to help understand how IPV had impacted on the participants' mothers' parenting and her parenting styles. In qualitative methodology, data analysis is defined as the process of using a certain method to search and arrange the interview transcripts collected by the researcher to increase the understanding of what was being studied (Cresswell, 2015). The process of analysing the collected information involves coding which requires the researcher to identify the topics, issues, similarities and differences revealed by the participants thereby coming up with different themes (Sutton & Austin, 2015). Coding is the process of studying the data gathered from the participants which involves

taking the data apart so as to put it together in a meaningful way and linking it to the research question (Creswell, 2015). At the first reading, the researcher was able to establish several main ideas from each participant which are known as tentative codes or ideas that the researcher thinks are of great importance but might change later with further analysis (Henwood & Pidgeon 2012). Charmaz (2006) describes this kind of coding as line coding and it was found to be useful in this research as it allowed the researcher to remain open-minded about what was in the data and to avoid jumping to conclusions.

Thematic analysis was used after coding the information because it helped to draw together the codes from one or more transcripts to present the findings in a coherent and meaningful way (Braun & Clarke, 2006). Thematic analysis is “a method for identifying, analysing organising, describing and reporting” (Braun & Clarke, 2006, p. 79) themes found from the collected data. In this study, the identification of themes involved reading and re-reading the transcripts to gain a deeper understanding of the main issues raised by each participant. Initially there were twelve themes identified but with further reading and analysis these were later worded more effectively and aligned to the research objectives which resulted in nine themes. For example, one of the themes which was worded differently was that the participants had found that their mothers were withdrawn, and this was later changed to mothers were emotionally unavailable to reflect how IPV impacted on the mother’s parenting. The benefit of using a thematic approach was that a huge amount of material collected from the participants could be easily managed. The findings were reviewed and compared to the available literature (Burns & Grove, 2001).

### **Ethical considerations**

IPV is a sensitive topic that has ethical implications for the participants involved as well as the researcher. A researcher holds power and must accept the responsibility that

comes with it (O’Leary, 2014). Ensuring the safety of the participants and adhering to the research ethics in all the stages of the research was therefore considered in this research. This study was guided by the Massey University Code of Ethical Conduct and the Aotearoa New Zealand Association of Social Workers (ANZASW) and the Australian Association of Social Workers (AASW) codes of ethics.

The process in gaining ethical approval involved presenting the ethics application to the Massey Human University Ethics Committee who gave feedback and questions which were addressed with the support of supervisors who ensured that all aspects of the research project were ethically sound. The ethics approval was then granted in October 2018 (Appendix G). According to the WHO (2001), the nature of the IPV topic means that the researcher must ensure informed consent, safety of the participants and ensure that the research is kept confidential at all times.

### **Informed consent**

Respect for the participants involved and giving them the opportunity to make their own decisions to take part in the research was a key ethical consideration. This links to the concept of autonomy and self-determination (Mandal & Parija, 2014). The purpose of informed consent is to protect the participant’s well-being throughout the research by ensuring they understand the nature, purpose and the implications of taking part in the research (Mandal & Parija, 2014). To do this the participant had to be given enough information about the research. In addition to this the Massey Human University Ethics Code (2017) states that in consenting to participate, the participants must be made aware that their participation is voluntary.

To ensure that informed consent was adhered to, the people who had responded to the researcher’s advertisement were sent the information sheet which outlined the research topic,

aims, their involvement, how the data would be collected and analysed as well as their rights to withdraw from the research at any stage before the data analysis stage. The researcher then made an initial appointment to meet with the participants and explained the information face-to-face in detail and also had a Skype meeting with the two participants who had chosen to conduct their interview through Skype. The participants were then asked to sign the consent forms before the commencement of the research (Schofield, 2014). These were then kept in a locked cabinet at the researcher's home to preserve confidentiality.

### **Minimising harm and providing safety**

There is an ethical concern that researching on IPV has the potential to cause harm or distress to the participants (Ellsberg and Heise, 2002). This principle is related to the risk that participants may suffer harm if the abusers find that they have taken part in such a study and that they had talked to someone about their experiences (Kelmendi, 2013). There is also the potential that this research could evoke negative memories that might be emotionally harmful to the participants (Kelmendi, 2013). To eliminate such risks for this study, the researcher interviewed people who were no longer living with their parents or in abusive relationships. The participants also chose when and where they wanted to meet with the researcher. Ellsberg and Heise (2002) stated that there can be potential for participants to become distressed by insensitive interview questions or having to recall some painful experiences. Having worked in the family violence sector for more than four years and having had training on how to identify people affected by IPV and how to support them, the researcher felt equipped to engage with the participants. The researcher also had training on how to interview IPV victims and was therefore able to conduct sensitive interviews and also had the support of her supervisors who provided her with guidance before and after the interviews.

Although the research topic was on the perspectives of their mother's parenting, some of the participants could have shown signs of distress and the researcher was ready to pause or stop the interview until the participant felt comfortable to continue (McCosker, Barnard & Gerber, 2001). The researcher also had information on services to protect victims of violence (Ellsberg & Heise, 2002). It was the researcher's moral obligation to refer participants to counselling if they wanted to and to ensure that they had regained control of their situation by talking to the participants about issues raised (Orb, Eisenhauer & Wynaden, 2000). In this study participants were open to discussing all the questions put through to them with no signs of distress. The researcher acknowledged the participants' strengths to do the interview and this helped build trust between the researcher and the participant. According to McCosker et al, (2001) this is the principal concern when asking people about their views, knowledge and life experiences.

### **Privacy and Confidentiality**

Confidentiality was another ethical issue considered for this study. According to O'Leary (2014), confidentiality involves protecting the participant's identity. Ethical research should ensure the participant's identity remains solely with the researcher and that their data is stored in a secure place and will be destroyed appropriately. This research ensured confidentiality during the analysis stage by using pseudonyms and by recruiting participants from different organisations and locations where they were not known. The participants were informed about the limits to privacy and confidentiality, both verbally and in writing on their informed consent forms, and that confidentiality would be broken if the researcher had any reason to believe that participants intended to harm themselves or other people (Haggarty & Hawkins, 2000). There was no need to break confidentiality in this study as there were no safety concerns for the participants and other people.

## **Compensation and incentives**

This study involved the researcher providing the participants with cash donations in appreciation and acknowledgement of their participation (Fontes, 2004). According to Sullivan and Cain (2004), compensation may be used to encourage the participants to participate and to award them for their time, knowledge and contribution. The cash donation was a small amount and the participants were informed at the beginning of the interviews and it was noted in the information sheet that this was not payment for their participation but that it was a token of thanks. The compensation demonstrated to the participants that the researcher was grateful and valued their contributions (Fontes, 2004). The researcher explained to the participants that they would receive compensation regardless of the answers they gave and even if they decided they did not want to continue with the research (Fontes, 2004). The researcher also paid for transport for those participants who came to her office for the interviews.

## **Research rigour**

According to Long and John (2000), all research studies must be open to critique and evaluation to assess worthiness, soundness of the methods used, the accuracy of the findings and the integrity of assumptions made. Unclear or meaningless findings may result in the wasted time of both the researcher and the participants (Long & John, 2000). The integrity and accuracy of the qualitative research process is closely linked with demonstrating research rigour and trustworthiness of the data (Koch, 2006; Polit & Beck, 2008). To establish trustworthiness in qualitative research Lincoln and Guba (1989) developed a framework of credibility, transferability, dependability and confirmability. The credibility of the research may be gained through interpreting the participants' experiences and this was done through returning the transcribed interviews to the participants to validate what they had said. Only

one participant added more information about how she viewed her mother's parenting strategies when parenting with IPV. At the end of each interview the researcher summarised what the participant had said about their mother's parenting, their relationship with the mother and parenting styles to make sure that was what they had articulated to ensure the researcher had understood the participants views.

Transferability refers to the degree to which the results of the research can be generalised or interpreted for similar settings (Lincoln & Guba, 1989). The data obtained from this study is therefore not generalisable to all adult children's perception of their mothers' parenting. That said, the information may be transferable or applicable to other people who grew up in similar situation and may be helpful when working with affected mothers. Ryan, Coughlin and Cronin (2007) concluded that a research is trustworthy if the findings can fit into any context and readers are able to relate it to their own experiences.

Another rigour criterion explained by Lincoln and Guba (1989), is that of dependability which involves the researcher giving the readers enough information to determine how dependable the study is. For this study the researcher provided an audit trail by providing extract of the raw data, the coding system and results in the final thesis which could be clearly followed by another researcher (Sandelowski, 1986).

### **Limitations of the study**

The primary limitation of the study was the small size of the number of participants interviewed which resulted in difficulties in lack of generalisation of findings regarding the adult children's perceptions of their mother's parenting in the context of IPV. However, the researcher decided to recruit six participants because in qualitative methodology, data depends on the richness of information collected rather than the size of participants (Creswell, 2013). The other limitation in relation to the small number of participants is that a

limited number of cultural or ethnic groups were interviewed. If participants from other cultures were interviewed, they may have had different experiences. The use of semi-structured interview was limitation because although this gave the researcher the opportunity to probe and explore the phenomenon in one interview it may have resulted in important information being missed as there was only one chance of engaging with participants (Di-Cicco-Bloom & Crabtree (2006). A follow up interview would have allowed the participants to reflect more on their experiences and give more details to the researcher. According to Adler and Adler (2002), multiple interview approaches allow a stronger connection between the researcher and the participants. However, a single interview was used in this study because of the sensitive nature of the topic under study.

The other limitation in this study was the use of Skype with video interviews. Though the advantage was that it allowed for time and convenience for the participants it did not allow for social contact which was present in face-to -face interviews (Deakin & Wakefield, 2014).

## **Summary**

Qualitative research methodology was used to explore the adult children's perceptions of their mother's parenting in the IPV environment. The initial plan was to utilise purposeful sampling to recruit participants but there were few respondents and then snowball sampling was used which resulted in the required number of participants. Semi-structured interviews were used to collect the data before it was analysed through coding and identifying emerging themes. The key ethical considerations were informed consent, harm minimisation, privacy and confidentiality. The limitations of the research methodology were identified as being the use of a small population study and using the single interview approach. The next chapter presents the research findings.

## **Chapter 4: Results**

This chapter outlines the data collected from the semi-interviews conducted with the participants. Several themes relating to how IPV had impacted on the mothers' parenting were identified from the data collected. The participants were also able to identify positive parenting by their mothers and their different parenting styles. The first part of this chapter will introduce the participants, their family composition and the type of violence they were exposed to. Secondly, themes relating to how IPV affected their mother's parenting will be outlined and this will be supported by quotations taken from the participants interviews.

### **The Participants and family composition**

#### **Fay (age: Mid 30's)**

Fay was oldest of five children all born to the same parents. At the time of the interview Fay had five children of her own and had separated from the father of the children. Fay was born in Melbourne and had grown up and attended school in Melbourne. Fay's parents had migrated to Australia from South Eastern Europe before she was born. The family lived with one of the grandparents who was very supportive of the mother and the children as they were growing up.

Fay's father perpetrated family violence on the whole family but most of his anger was directed towards the mother as he would swear and shout at her. Her father would swear at the grandmother as well and sometimes he would push her around. The family was not allowed to attend the community's festivals and his community was afraid of him as he would shout and argue with other people who were not family members. Fay explained that she used to see her mother's clothes ripped apart by the father and her mother constantly had bruises on her body.

At the time of the interview, Fay was no longer living with her parents who had also separated but she had an on and off relationship with her mother. She was no longer in contact with her father. Fay had separated from her own husband who had perpetrated IPV against her, and she stated that she did not want her children growing up in an unsafe environment as she had done.

**Melody (age: Mid 40's)**

Melody came from a family of four (mother and father and her younger brother). She was born in the rural part of Australia and then her parents had moved around different Australian states while she was a child. They always lived close to the ocean as her father loved fishing. Melody's father would take them boating even when they did not want to go and had to sit with him while he did his fishing. Her parents separated when she was about ten, and she remained in her mother's care while her brother went to live with the father. After separating from the father, Melody's mother had another partner who was also controlling and verbally aggressive towards her mother.

Melody's father's violence was fuelled by alcohol as he drank every day and then become very aggressive. Her mother would also drink but not as much as the father. Melody's father was verbally and physically aggressive towards her mother mostly and her younger brother. Melody witnessed the violence, but her father had not directly abused her. According to Melody, her father would come home from work and immediately start drinking his beer and did not want anyone disturbing him. He would drink such that by dinner time he was seething and everyone in the house was walking on egg shells because anything they said or did resulted in her mother being shouted at or physically assaulted. She explained that she remembered her mother being physically assaulted by her father and her

mother had come into her bedroom to hide and to ask her to protect her from the father's anger.

**Vaugh (age: late 20's)**

Vaugh was born in South America and had three siblings. Vaugh had then moved to Australia with her partner leaving her parents and three siblings in her home country. Her father perpetrated physical, emotional and psychological abuse towards her mother. Vaugh's father also prevented her mother from seeing her own family and would hit her most times in front of the children. Her father was also manipulative because he would hit the mother and when she shouted at him to stop or told him to leave, he would turn to the children and blame her for chasing him out of the house and forcing him to leave them. Vaugh's father was also a "chauvinist", having many women outside of marriage and this made her mother angry and resentful. Her father would hit her mother for asking him questions about his relationships.

At the time of the interview Vaugh stated that her parents had separated, and the mother had seemed happier living alone.

**Yasi (age: late 40's)**

Yasi's parents moved to Australia from South East Europe before she was born, and they had two children, Yasi and her young sister. Yasi's father perpetrated IPV towards the mother which involved hitting, spitting, kicking and swearing at her. Her father's violence was fuelled by alcohol as he used to drink during the day and then become easily triggered to be violent. With Yasi's father the violence had started when she was about ten years old as she remembered her father pushing the mother against the wall and shouting at her. She was in the same room and could see that her father was very angry; she had become very scared and had hid under the table. After that first incident, her father would hit her mother on regular basis and would sometimes hit Yasi with a belt. Her younger sister was too young and

most times when the violence took place, she was away at Day Care or at her carers and so was rarely exposed to the violence. Yasi's mother was isolated because of language barriers as she could not speak English and had few friends back then. Yasi's mother talked to her about the abuse though she could not understand it herself or offer any help at the time.

Yasi had left her parents' house because of the violence during her teenage years and her mother had remained with the father because divorce was not "heard of" in their culture till they both passed away. Yasi reported that even after leaving home, her mother would call her after her father had hit her and then she would then call her father to try talking to him, but he would deny being violent towards her mother.

#### **Amon (age: early 20's)**

Amon was the only male who took part in this research. He was seven years when his family migrated to Australia. His family used to be happy and enjoyed spending time together but that had changed when they moved to Australia. According to Amon, back in their home country, his father was well-off. He had people working for him but when they moved to Australia, he had to find employment to support his family and that had been hard for him. When his father was angry or stressed, he would blame his mother for moving to Australia as she was the one who had encouraged and influenced him to move. In Australia, the family did not spend time together as his father had to work most and his mother stayed at home.

Amon was the youngest of four siblings. As the youngest, he was always at home and had witnessed the first IPV incident between his parents when he was about eight years old. He had witnessed his father swearing at his mother. He reported that after that incident his father would hit and say a lot of "bad words" to his mother. Amon explained that he often saw his mother crying and knew that his father was abusing her regularly. The other children

had also realised that things were different between their parents, and his brothers had left home in their late teens as they could not stand to see their parents fighting all the time. Amon's mother had friends she could talk to; however, she could not tell them about the violence. Amon's mother also struggled with the English language.

Amon could not stand the fighting and shouting going on at home and had also left his parents' home as soon as he became a teenager and was able to find a job for himself. At the time of the interview he was living on his own but having regular contact with his mother. He did not have a close relationship with his father. The older children had already left but because of their Moslem culture one of the brothers had moved back in the parents' home with his new bride. Amon's mother had recently told him that the violence was now minimal because of the bride.

**Berry (age: early 20's)**

Berry was one of three children. She was born in another state of Australia and her parents had moved a lot before settling in Victoria to be closer to her mother's extended family. Her parents separated after some time and were living in different parts of Australia.

Berry stated that her childhood was "dramatic" as her parents were always arguing. Her father would shout and yell at her mother. He would even shout at her in public and this was quite embarrassing for Berry and her siblings. Berry explained that she was happy when her parents separated as her father was a difficult person to live with. Before the separation her mother was not allowed to see or talk to her family as the father was afraid, she would tell them about the violence. According to Berry, the family was also struggling financially, and her father did not work as he had some mental health issues, so the mother had to provide for the family. Berry's father did not recognise this and seemed unappreciative of the mother's efforts.

Berry's mother had separated from her father who was violent and had met someone who made her happy. Berry stated that there was no violence between her mother and her new partner, but she (Berry) did not get along well with him because of his "strange beliefs".

At the time of the interviews Berry was no longer living with either of her parents but had regular contact with her mother stating that she spoke to her on daily basis but did not have any contact with her father.

### **Research themes**

The aim of this research was to examine how IPV impacted on the mother's parenting, parenting styles and the mother-child relationship. The following themes were identified:

1. Mothers were perceived as unprotective
2. Ability to offer comfort and give attention to their children
3. Mother's physical health and her parenting
4. Relied on fathers for support
5. Children took on adult roles
6. Disrupted mother-child relationships
7. Impact on their mothers' parenting style

#### **Mothers were perceived as unprotective**

The mothers were consistently viewed by the participants as being unprotective especially in respect to the violence that was occurring in the home. The participants stated that they were therefore exposed to the violence in the home. Melody believed that she witnessed a lot of violence between her parents who were not "very conscious of the idea of being violent to each other in front of us" and that she never heard her mother say "not in front of the kids, or can we talk later" to her father. She could not remember a time when her

mother stopped or prevented the father from hitting her brother. Fay said her mother seemed to side with the father and so did not protect the children when their father hit them. Further, she would report to their father anything they said to her in confidence, so “she wasn’t as protective over her children as you would expect a mother to be”. Her mother would try to do right by the father as she saw him as someone who would always be with her as Fay commented that her mother’s attitude was that her children will grow up and leave her.

IPV had an impact on mothers’ decision-making skills as they took long to separate from the violent fathers and others did not leave. This was viewed as being unprotective by Vaugh and Berry who did not understand why it had taken their mothers so long to leave their fathers. Berry explained that her mother had remained with her father for a long time as the parents had depended on each other financially and because the children were still very young. Berry, had however, felt let down by her mother’s decision to continue to stay with her father. Leaving children with an abusive father was also seen as being unprotective with Vaugh disclosing that her father would physically discipline the children which was “scary” for them.

Amon’s mother talked back at his father and this had made the situation worse for her as it made him very angry. Seeing his mother fight back and his father becoming more violent was considered to be a provocation by Amon who took this as being unprotective. Amon talked about how angry he would become when his parents argued and when his father physically assaulted the mother. He explained that probably his mother had thought of leaving but could not do so because of their Moslem culture. He explained that in their culture and religion divorce is frowned upon and couples would always be encouraged to stay together and endure whatever hardship they were going through. The participants relied on their mothers to protect them during this IPV time and when this did not happen it impacted on the way they viewed their mothers’ parenting.

### **Ability to offer comfort and to give attention to their children**

The participants agreed their mothers' ability to offer them comfort was compromised. Their mothers were unable to be emotionally present to their children and yet their children wanted to feel comforted and loved as they were growing up in this violent environment. Berry explained how her mother seemed pre-occupied about keeping herself safe from the father's violence so much that she did not recognise how scared her children were as well. Her mother did not communicate with them as children to understand their fear and that they were hurting as well because they were concerned for her safety:

*B: I think it was really scary, because she was worried about her own safety, but it was always, scary for us kids seeing that happen to our mother.*

*R: Yeah that would be very scary for the children to see that?*

*B: Yeah, but I think my mum knew she would always be ok, like, we didn't always know that. (Berry)*

Fay recalled that her mother did not talk to them about what was going on at home and she did not feel loved by her. She explained that her mother did not comfort them when their father abused them, and she felt her mother was "not able to be present for her children" as she did not show them any emotional connection:

*There wasn't any love, there was no hugging and kissing and that kind of stuff parent do with their children. It wasn't there from my mother.*

*(Fay)*

Because they did not receive the physical affection they needed from their mother, Fay and her siblings relied on their grandmother who lived with them. Fay appeared to blame

her mother for the fact that she and her siblings do not get on along well even now because their mother did not show them how to love and be there for each other.

Melody described her mother as being cold and withdrawn. She stated that at times she felt she was getting close to her mother and they could talk but then she would withdraw from her pushing her away as soon as she felt Melody was closer to her father. This was confusing for her and Melody did not know how to react or behave as a child because her mother needed her but also manipulated her feelings. She stated that she had to be there for her mother, but her mother was not there for her.

Yasi had felt her mother's emotional unavailability when she was not comforted when she was upset and scared. According to Yasi, her mother was at a loss as to how to respond to her two children when their father was violent. Yasi's mother was crying constantly and knew that Yasi was upset as well but she was not be able to console her:

*But she didn't know what to say to me, to calm me down. But she knew I am upset. And I would be crying. She would, she didn't know. She thought that by telling me that next time would be better I will feel better in myself. You know, it wasn't working.*

*(Yasi)*

The participants generally perceived their mothers as being depressed and unhappy most of the time. According to Yasi, her mother cried a lot and was constantly exclaiming that she did not know what to do which impacted on the way she protected and cared for her children. Yasi explained she cried a lot herself and had to console her mother. She would also encourage her to talk to her few English-speaking friends. Yasi's family migrated to Australia and the mother stayed at home looking after the children while the father worked long hours. He would take out his frustration on the mother who had no family in this country. Yasi's mother had, after some time, managed to forge friendships but when she disclosed the abuse

the friends had encouraged her to remain in the relationship and work things out with Yasi's father which she did,

*... she didn't know what way was right to go. She was really, because, he was hitting her I think she was really upset up here (pointing to her head). You know she was very upset in her brain thinking...she was feeling very upset and crying, you could see she was really depressed, you know. It was not good for her. (Yasi)*

The participants' mothers seemed to have lost interest in what was going on for them and their children. Vaugh's mother stopped enjoying her life when she married Vaugh's father as he was violent. According to Vaugh, her mother used to smile a lot and had a lot of friends but that had changed when she met her father and had children. She had lost most of her friends and was paranoid:

*she became paranoid with time. She can't trust people, all the time she thinks someone is going to take her or do something bad to her. (Vaugh)*

Vaugh stated that she did not have many happy memories together of her family. Her mother became very strict wanting to know what they were doing and became paranoid with Vaugh especially when she did not do well at school. Vaugh viewed this as her mother having lost trust in her father and men in general, she would push her to do well at school with the hope this would make her self-reliant and did not want her to end up with a man like her father. Vaugh viewed this as her mother being strict because of what she had experienced with her father.

Melody suspected her mother suffered from clinical depression and quickly added that her mother was, however, not diagnosed with any mental health issues, but she was quite emotional, crying most of the time when she was alone. Melody explained that her mother would drink alcohol to cover up her depression or sadness and that she could have been

taking sleeping tablets as well. Melody clearly realised that her mother was unwell and attributed this to the IPV. Her mother would become verbally and emotionally abusive towards her when she was drunk or after an incident with her father.

Melody's mother's moods were unpredictable as sometimes she would be good and kind to her, but at times she would be cold and spiteful. Melody's view was that the violence made her mother become a "bad person" she gave an example that if her mother felt like she was losing her children to her father, she would resent this and lash out at Melody and her brother.

### **Mothers' physical health and parenting**

The mothers' physical health was viewed as having an impact on their parenting as they struggled to take care of themselves and their children. Amon believed that when he was a child his mother was taking more than twenty-five types of pills and was too sick to attend to her children's needs as she had medical appointments and was constantly not feeling well:

*...getting all these diseases like, pressure, diabetes, everything you name it and she will be having it. She started taking tablets and as far as I know she is drinking about 25 tablets. (Amon)*

Like Amon's mother, Fay suggested that her mother struggled with her health and did not take good care of herself. Fay stated that her mother did not eat well or worry about her appearance and she had become obese when she was still living with her father. According to Fay, her mother had also become a compulsive cleaner which led to her being too tired to be physically and emotionally available to her children. Vaugh declared that her mother suffered from severe headaches and she would not allow her children to play freely or make noise around her as she would hit them or for disturbing her when she had those headaches.

### **Relied on fathers for support**

Social isolation was also identified as an impact of IPV especially because the mothers generally had no one to talk to except their children. Fay stated that her family had moved to Australia with her maternal grandmother who was of great support to her mother and them as children. She explained that her father was known as a violent person even in his community and her family found themselves isolated from their ethnic community because of this. Fay reiterated that because of her father's violent behaviour her ethnic community was also afraid of approaching her father and so her mother could not approach them for support. Her mother kept to herself and therefore depended on her father for support. Amon explained that his mother kept to herself and that as children they were not allowed to bring their friends over to their house. Amon disclosed that his mother found it difficult to sleep at night and would instead talk to her family overseas most nights as she had no family in Australia. Melody disclosed that her father would take them with him when he went fishing even when they did not want to go so that they were always travelling together. Melody explained that her family had moved a lot and so her mother did not have a lot of friends.

The isolation made mothers rely on their children for support. For instance, Yasi's mother would talk to her about the violence and would ask her about what she would do in her situation. Though Yasi's mother wanted to tell other people about the violence she could not do so as she struggled to communicate in English. She was not sure she would have been supported or what supports were available to her. Social isolation was not only experienced by the migrant families, Berry's family was Australian, but her father had forbidden her mother from talking to other people for fear she would disclose the violence to them. This resulted in the mother being isolated and only having her children and her father to rely on.

### **Children took on adult roles**

Mothers' parenting abilities was impacted by the IPV, so children found themselves taking on the roles of parenting and protecting the mothers and other siblings. All participants expressed how they had to take on the parenting roles and do what the mothers were struggling to accomplish because of the IPV they were experiencing and having the abusive father at home. Fay reminisced that when she became a teenager, she felt her mother was not doing her role as a mother as she was not removing her children from that violent environment and took it upon herself to protect her siblings:

*So, I was the one who felt protective. So, the protection she should have been giving wasn't there so I kind of took that over, I would be protective. I became incredibly protective. It was just strange for me. (Fay).*

To further protect her siblings, Fay stated that she had stepped up and had her siblings placed in her care after the family was reported to child protection services and the younger siblings were about to be placed in foster care. Fay explained, she was no longer living in the family home and was therefore able to have her siblings placed in her care away from her father. She also tried to get her mother to admit that the father was being abusive towards her and to seek support, but her mother could not admit this at the time as she relied on him to provide for her financially.

Melody perceived that she had taken on the role of a parent from the time she was four years old when her mother had called upon her to protect her from her father's physical assault. She explained how one night her father was hitting her mother and her mother had crawled into her bedroom and had begged her to stop him from hitting her. Melody exclaimed that she was very scared as the mother begged "Don't let him get me, don't let him get me". Melody stated that she had felt disconnected from the whole situation as she tried to

deal with what she was seeing and hearing from her parents. She reflected that she was always involved in her family dynamics somehow and found it hard to be just a child who could make mistakes and be sad about her own situation. She explained how she became her mother's confidante:

*... she used me as a confidante from the age of 4 or 5 so she would tell me all her troubles to do with dad which was horrendous because at the time it drove, it tainted my relationship with my father, you know she would say things like you know, your father is a bastard, he's out with that woman again, I know he is somewhere where he shouldn't be. Over and over, she would say "your father is a bastard". I didn't even know what bastard meant but I knew it was bad. (Melody)*

Melody explained that her mother seemed to rely on her for advice and was only able to leave her father after she had encouraged her to do so. Melody discussed that at the time she had felt that though she was child in the house, she was able to assist the mother with making very important decisions. Fay had also disclosed that she had also encouraged her mother to leave but her mother had decided to remain with her father for a longer period and it was only after the children were older and had left home that she decided to leave him.

Yasi explained that she was present in most cases when her father would hit or shout at her mother. Her mother had no one to talk to about her experiences because of the language barrier and so relied more on Yasi. She would talk to Yasi about the father hitting her and how things were going to get better:

*But she was scared, she was crying all the time. She was saying to me "Don't worry about him. He is like that. We will be alright" but she did not know, which way, she didn't know what way is right to go. (Yasi)*

Yasi explained that she worried a lot about her mother and could not sleep at night and though she talked to her mother about her concerns the mother did not seem sure of what to say to comfort her. This had put a strain on Yasi's childhood as she was made to think about her own safety as well as that of her mother. Her mother relied on her even when she was a teenager and had left home, as her mother would call to tell her that her father had hit her again. Yasi stated that she had taken it upon herself to talk to her father about the abuse. This, however, had no impact as he continued drinking alcohol and being abusive towards her mother.

Amon felt unsupported at home and his other siblings realised that their parents' behaviour was not changing. His brothers left the family home as soon as they became teenagers as they could not stand the violence anymore. He had also learnt to protect himself from what was going on at home by keeping to himself and as soon as he was able to, he also left to live by himself. Berry explained that she had remained with her mother as she felt her mother needed her as she was not allowed to talk to her other family members.

### **Disrupted mother-child relationship**

In this study all participants found that the IPV had an impact on their relationship with their mothers. The participants blamed their mothers for remaining in a relationship with a violent father with Berry reporting that she was "stoked" when her mother left her father and that this had improved her relationship with her. The participants noted that their mothers' actions were out of character during the time when she was experiencing the IPV. Melody recalled how her mother had become jealous of her so much that she did not want her to continue with her education. Melody stated that there was so much resentment from her mother, and it appeared as if she did not want her to do better in her life:

*You know, and I remember hearing her saying, 'well it was good enough for me', you know. So, Yeah I was flabbergasted after I overheard that and I also knew that my mother was planning, scheming to take me out of school so I think she battled with a little jealousy as I came into womanhood with me and part of it was just she saw every woman as a threat to whoever, whatever current partner she was with.*

*(Melody)*

Melody reflected that her mother's jealousy towards her was because of what her mother had been through with her father. Her mother saw her father's violence as having stopped her from doing anything better with her life. Melody shared that she felt her mother was jealous of her progress and wanted to stop it, for example her mother did not seem happy that she wanted to go to college as she herself had not had the opportunity to do so. Melody's view was that the mother did not view the father's violence for what it was but had directed her violence towards Melody.

Melody's views were similar to those of Fay who had shared that her mother had blamed her when child protection services became involved with her siblings. It appears Fay and Melody's mothers blamed their children for the situation they found themselves in; not realising that the IPV was impacting on the way they viewed and interacted with their children. According to Fay and Melody their mothers had less patience and were not attentive to their children as they were consumed by what was going on for them which then impacted on their relationship with their children.

Amon did not have a good relationship with his mother as she viewed her as being unprotective. His mother would at times talk to the children after an upsetting incident with their father, but she would not make any changes so that the violence would stop. Amon seemed to blame his mother for talking back at his father causing him to be angrier with her.

His view was that his mother should have been quiet and gone along with the father's demands as that would have stopped the violence:

*... my mother started to abuse him back. I think that's where the problem started because in our culture, I think in your culture as well, women are always kept down, and you never want them to talk back but my dad he saw my mum talking back and he even got more angrier, so things got out of control. (Amon)*

In Amon's view, his mother would also go about doing her "duties, she did everything but in other ways, I would say she had no options" resulting in Amon and his brother's feeling that the only way out was to move out of the house and leave her with their father. Amon resolved that he had become independent at a young age and had moved out of the family home at the age of sixteen.

IPV had also impacted on the relationship between Vaughn and her mother. Because of the violence Vaughn's mother became very "strict" with her and was always pushing her to do better for herself and Vaughn did not see this as being caring. Vaughn explained that she "hated" her mother because she believed her mother caused the violence at times, for example she told Vaughn's father to leave the house. Vaughn's view was that she loved her father too and felt that by chasing the father away the mother was breaking the family up.

The interviews indicated that the participants wanted to have a closer relationship with their mothers, but the violence had made the relationship very difficult. Participants identified that their relationship with their mothers was difficult as their mothers had not left their abusive fathers and that she relied on them for support.

### **Impact on their mother's parenting style**

When asked about their mother's parenting styles, some of the participants felt that the IPV had made their mothers strict and that she would use physical punishment to discipline them. Fay stated that her mother was concerned about pleasing her father so much that she could not focus on her children. In the process Fay noted that she "inflicted a lot of violence on me too". Her mother hit her children "heaps of times" when she was angry at them and did not seem to have sympathy for them. Fay gave an example of how her mother would punch her on the mouth if she told her she had a wobbly tooth. Fay sometimes had both her mother and father punish her:

*...she would tell me to clean up my room and if it wasn't like, perfect she would tip up everything on the floor and I would have to start up again. So, there is all that mental stuff as well or if I came home with a 9/10, I would get a beating. They would both yell at me. They would complain. Yah, there is all that mental stuff as well that I think is much more damaging in a lot of ways than the physical. (Fay)*

Melody explained how her mother would not stop her father from hitting her brother and added that her mother would also use physical discipline on her brother as a way of managing his challenging behaviours. Melody felt her mother was strict on her as she would shout at her "a lot" if she indicated that she was closer to her father. When she was about ten years old, Melody's parents separated, and she had to live with the mother but had regular contact with her father. Her mother's new partner was also abusive, and this had made her mother more paranoid and stricter with her.

Vaugh believed the violence had made her mother work very hard to support the family. She would therefore be harsh with the children, wanting them to do well at school and would force them to read a lot. According to Vaugh, her mother's aim was that her children

should do well at school and have their own money especially for Vaugh as she was a girl so that she would not depend on a man if she did become married. Vaugh stated that her mother would always stress about money:

*She has the money always in her mind and I know why because my father didn't want to give her money, she had to pay everything on her own. For her she became obsessed with education and money and we didn't have like anyone like hobbies or afternoon play around or something like that. (Vaugh)*

Berry explained that before the violence, her mother was not as strict with her, but the violence had made her different and difficult to live with and Berry had resented her father for the change in her mother's presentation. Berry elaborated that her mother had made life difficult for her by being constantly "on her back" and not allowing her to do whatever she wanted because she saw similarities between Berry and her father. Berry explained that like her father she suffers from a mental health condition which her mother did not understand and so she struggles to have a good relationship with her.

Amon explained that the violence against his mother had begun sometime after they moved to Australia. Amon explained that back in their home country the family spent time together but once in Australia his mother seemed to be preoccupied by her home duties and did not have control of her children because. According to Amon, he spent his time alone in his room doing what he wanted, and his brothers went to their friends' houses and had finally left the family home as soon as they hit their late teens. Amon's view was that his mother was not interested in what her children were doing or going through as long as she was able to cook and clean the house for them.

## Positive parenting during IPV

Although the participants identified that the IPV had negatively impacted on their mother's parenting, they were also able to find some positive elements. Though the participants were in a violent environment, they identified instances where their mothers were able to protect and have a good time with them. Amon's mother, for example, would get them into a room and try to console them and sometimes she would send them to their neighbour's house so that they were not exposed to the father's anger. This was similar to Yasi's experience as her mother would take them somewhere to distract them:

*And she tried to make me happy, like take me to the park, take me somewhere else to forget it. Spend time together. Or go shopping or something to make me forget it. Because the more you are in the house you remember this, you know. She was a good Mum. (Yasi)*

Yasi described her mother as her comforter. She explained that although her mother was always scared of what her father would do, she would try and comfort her and tell her that they will be alright. Yasi explained that she was not sure if things would be alright at home as the father would always be violent towards the mother, but her mother believed her father would stop being violent and this belief was a comfort to her.

Melody described her mother as being affectionate and generous and this increased her affection towards her:

*... she could be very affectionate and that's why I could predominately feel like I had a relationship of closeness with her. She hugged me, kissed me, she liked to take me out shopping, like any sort of girl expectations, she was very generous in terms of like, the sort of gifts she would give me, they were mostly, because she could get a lot*

*of discounts on cosmetics, perfumes which was great for a teenage girl, like I had so much cosmetics and perfumes it was ridiculous, so she was generous, you know she could be very generous. (Melody)*

According to Vaughn, her mother showed her, and her siblings love through providing for them and making sure they had a good education. Leaving her father was also a sign to Vaughn that her mother loved her especially as he had begun hitting her and her siblings. Berry explained that her mother also tried to protect the children from the IPV exposure by taking them to the grandparents which Berry viewed as a sign of positive parenting.

### **Summary**

This chapter presented the findings of the research related to the impact of IPV on the mother's parenting, mother-child relationship and parenting styles. The chapter included the participants' characteristics and the overarching themes that were drawn from their responses to the interview questions. What was apparent from their responses was how negatively the IPV had impacted on the participants' mothers' parenting, their relationship with their mothers and on their mother's parenting styles. The participants highlighted that because of the IPV their mothers were unprotective, emotionally unavailable and that it had also impacted on their mother's mental health and had resulted in them becoming very strict in their parenting. Some participants did not feel protected by their mothers as they had to protect themselves and their siblings. The participants explained that their mothers relied on their children for support to cope with the situation and in some cases her children helped her to find strength to leave the violent relationship. The IPV influenced their mother's parenting styles in that they had become permissive with their children and sometimes they used physical punishment to discipline them.

The participants expressed their love for their mothers in the way they described her and stated that in the absence of the violence their mothers always found time to spend with them outside the home and were warm and caring towards them especially when they were away from the father. This indicated that though the IPV had a negative impact, the mothers did think of their children's wellbeing and tried to remove them from the abusive environment albeit for a short time. In the next chapter, these research findings will be discussed with reference to the relevant literature.

## Chapter 5: Discussion

The research focuses on how IPV impacts on mothers' parenting, parenting styles and the relationship between mothers and their children. This chapter will analyse the themes derived from the interviews with the six participants and link them to the research objectives and how they relate to the relevant literature.

The purpose of this research was to understand the impact of IPV on mothers' parenting from the perspectives of six adult children who grew up in this environment. The research findings gave a detailed account of how the adult children felt their mother's parenting was impacted by her experience of the IPV. These findings extend the current understanding of how intimate partner violence (IPV) complicates mothers' parenting. This study indicates that when fathers exercise their control and domination on mothers, it has an effect on the mother's parenting and, on the mother-child relationships. This research confirmed that gendered violence was the main factor in the mothers' lives as the violence was perpetrated by their fathers on their mothers (LaComb-Davis, 2013). The idea that children are primarily women's responsibility constitutes an assumption at the heart of the institution of parenthood but then it should be understood that IPV impacts on them fulfilling that role (Mullender et al., 2002). Some feminists, activists and researchers have pointed out that men's violence creates a complicated situation in relation to mothers' mothering and that violence has far reaching effects on mother's feelings and behaviour towards her children as well as their own sense of identity (Kelly, 1994). Using intersectionality analysis, which takes into account the many facets of abuse in addition to gender (Damant et al., 2008), this study allowed the exploration of the research objectives which are:

1. To investigate how parenting in the context of IPV impacted the mothers' ability to meet their children's needs.

2. To understand the mother-child relationship from the perspective of adult children who were parented by a mother experiencing intimate partner violence (IPV).
3. To examine how the mother's parenting style was affected by the IPV.

This chapter is organised into sections based on the study's objectives as well as the themes identified under each objective. It begins with the explanation of the findings using feminist theory and intersectionality framework.

### **Feminist theory and intersectionality framework**

Feminist theory argues that IPV is directly connected and influenced by the patriarchal society which is reflected in men's violent behaviour towards women (Rakovec-Felser, 2014). These research findings emphasized that mothers were oppressed by their male partners and that this affected and constrained their individual lives and their mothering roles. The findings also provide an insight into motherhood and the support of patriarchal ideology that controlled and dominated mothers and their parenting (O'Reilly, 2004). This was congruent with Damant et al.'s (2010) findings that abusive men tend to target the mother-child relationships and their mothering role. Similarly, Mullender et al. (2002) pointed out that men attacked the mother's parenting abilities as they knew that this signified who they were and that this was also their area of fragility. Fathers abused mothers in front of their children in order to control both the children and their mothers (Mullender et al., 2002) and this had an impact on the mothers' parenting and the children's behaviours.

Intersectionality helped to explain the other factors that contributed to the women's oppression. The research participants represented different cultures, because although they had all been brought up in Australia, four of them had migrated to this country with their families. Their mothers were therefore faced with a variety of issues due to their migrant status as well as IPV. Three were the adult children of mothers who struggled to

communicate in English and therefore did not disclose the IPV to other people for fear of being misunderstood and/or being ostracised in their communities if they divorced or left their husbands (Rees & Pease, 2007). One of the participants explained that talking back to the father and separating from the father was against their culture. According to Kasturirangan, Krishnan, and Riger (2004), in communities where family collectivism is valued there is an inclination to suffer in silence in abusive relationship rather than talk about their problems to other people which was what most of these mothers seemed to experience. Additionally, the newly arrived mothers also had a very small social network and could not have been aware of what support services were available to them as victims (Pels, van Rooij & Distelbrink, 2015). This indicated the women were faced with more than just IPV, but other intersections played in their lives. Crenshaw (1994) stated that there were other cultural barriers which could limit women from seeking support to address their IPV experiences and these included limited language skills, dependence on their spouse for financial support and social isolation. By incorporating intersectionality this study was able to highlight how IPV affected mothers' parenting as some mothers had limited language skills and had felt disempowered against the male abusers and was able to include experiences of marginalised mothers as perceived by their children (Cho, Crenshaw & McCall, 2013).

### **Objectives:**

**Objective 1: To investigate how parenting in the context of IPV impacted the mothers' ability to meet their children's needs.**

#### **Mothers were perceived as unprotective**

Children growing up in a violent environment rely on the non-abusive parent to be there for them and to protect them from exposure to and witnessing of violence (Margolin & Vickerman, 2007). Children's capacity to cope with violence is compromised by the non-abusive parent's inability to cushion them from the trauma due to their own stress (Margolin

& Vickerman, 2007). Most of the participants in this research identified that they felt their mothers were unprotective which has been further explained as the direct impact of IPV on the mother's parenting (Letourneau et al, 2011; Radford and Hester, 2006). Abused mothers can become trapped in their own violent situation which contributes to them having difficulties in protecting their children or shielding them from the effects of the abuse as they have inadequate parental protection (Kantor & Little, 2003). Further, the abuse may cause mothers to project their own anger and self-hurt on children thereby becoming punitive and neglectful of their children (Stephen, 1999).

Mothers were deemed unprotective by the participants because they remained with the abusive father, but mothers may have remained in that relationship with the belief that children deserved to have both parents living together and with the hope that their father would reconsider their actions and stop being abusive (Anderson et al., 2003; Stephen, 1999). Previous research, however, suggests that children often blame their mothers for remaining with their fathers (Mullender et al., 2002). Studies have been conducted which give different reasons for mother's remaining with the father including: no support as mothers were new in the country; financial instability; and the belief that the father would change their abusive behaviours (Anderson et al., 2003; Lynch, 2016).

In other research, where mothers did not leave their abusive partners, they were seen as being unprotective or were deemed as neglecting their children (Kantor and Littler, 2003; Johnson and Sullivan, 2008). These findings seem shift the focus from the abusers placing it on mothers so that the IPV problems were defined in terms of mothers' failures instead of the effects of the abusers' actions (Strega et al., 2008). Mother's protective efforts and capacities were often overlooked as well as the fact that the environment they are parenting in was full of disadvantages. In some studies, there is evidence that mothers were mandated to do parenting courses and to undergo parenting assessments when perpetrators were not held

accountable for their actions (Nixon, 2009). Mothers could be perceived as unprotective if they remained silent about the violence and this was viewed as minimising the abuse by the participants (Haight, Shim, Linn & Swinford, 2007).

### **Relied on father for support**

Some of the participants expressed their mothers had no one to talk to about the situation that was going on at home. The guilt, shame, and social isolation have been identified as the main obstacles of disclosing IPV (Albuquerque Netto, Moura, Queiroz, Leite & Silva, 2017). Some participants' families had moved to Australia and had little social network. Mothers did not disclose their IPV experience for fear of embarrassing their families and because often times, mothers experiencing IPV are economically dependent on the abuser and lack financial security they therefore do not report the abuse (Ghafournia, 2011). Language barriers were identified by some participants as an obstacle for their mothers as they could not speak English to express themselves to their neighbours and friends. Language barriers are often used as a tool of power and control by fathers in an IPV environment so that mothers will depend on them for support (National Council to Reduce Violence against Women and Children, (NCRVWC), 2009). This dependence on fathers also meant mothers stopped seeing father's actions as abuse and then they may start minimising their experiences.

By minimising the abuse, mothers were viewed as being unsupportive by some of the participants as they realised that this meant that their mothers were not going to seek support. Minimisation of the abuse is quite common among women in abusive relationships and as they use it as a defense mechanism to prevent further violence against themselves or their children (Bogat, Garcia, & Levendosky, 2013). However, Stern (2012) states that by minimising the abuse mothers are holding back their fear, and he likened this behaviour to the dissociation which came about because of post-traumatic stress disorder. Dissociation was

described as a way of coping with the IPV though its prolonged use was said to lead to mothers' perpetrating violence on their children instead (Luxenburg, Spinazzola, & van der Kolk, 2001). A few participants disclosed that their mothers became emotionally stressed and one of the participants stated that the mother would use a belt on them in anger and this resulted in children resenting their mother. This behaviour also affected the way they responded to their children's emotional needs.

### **Ability to offer comfort and give attention to children**

According to the participants, mothers were physically present at home with their children but struggled to provide emotional support and were deeply depressed to offer them comfort. Maternal stress and depression may sometimes lead to mothers being emotionally distant, unavailable and even abusive towards their own children (Holden, 2003). The participants in this study perceived that the IPV experience resulted in their mother's being emotionally drained and with less time to spend with them. In addition to this, Hutchinson (2011) states that mothers experiencing IPV become emotionally unavailable to their children as they may be depressed and sometimes preoccupied with the abuse and their own personal safety. In the current study, some participants remarked that their mothers were crying constantly, looking tired and appeared confused about making decisions about their situation. According to a study conducted by Levendosky et al. (2000), where they examined the effects of domestic violence on mothers' abilities to parent, mothers had expressed that the violence had taken a toll on their emotional energy, affected the time they spent with their children resulting in them being easily frustrated with their children's demands. In the current study, the participants felt that their mothers were emotionally distant towards them as they could not talk to them or receive from comfort them.

Some participants explained that their mothers did not talk to them about the IPV they were experiencing and when mothers spoke about the violence it was often age inappropriate and had left the children feeling confused. In some cases, mothers struggled to communicate about the violence to their children and appeared to be uncomfortable during the violence (Weisberg, 2018). According to Wendt et al. (2015), however in this instance children were bound to wonder about their mother's feelings about the abuse and make up their own minds about their mother's thoughts and feelings towards them and what they were going through. The IPV had an impact on mother's psychological functioning which led to changes in her mood and having a negative impact on her parenting and her children's wellbeing (Levendosky & Graham-Bermann, 2001). Levendosky and Graham-Bermann (2001) state that children rely on their parents' emotional regulation to be able to learn how to manage their own emotions and behaviours. Children learn these behaviours from their parents which is why it is important for parents to be emotionally stable and emotionally present for their children which can be very difficult during IPV (Chiesa et al., 2018). Kobak and Madsen (2008) concurred with these findings adding that IPV often creates a situation where the abused parents become unavailable and unpredictable towards their child and that this unpredictable behaviour leaves their child without emotional regulation resulting in them undermining the parenting capabilities of the non-abusive parent. The participants expressed their concerns for their mothers' safety and ability to protect them. This resonates with research from Pernebo & Almqvist (2016) who suggest that mothers who appear helpless and fearful may appear incapable of protecting themselves and their children which in turn may instil fear in their children. Mothers' emotional wellbeing has an impact on their mental health and some abused mothers experience post-traumatic stress disorder (PTSD), low self-esteem, depression as well as anxiety which may impact on their parenting (Holtzworth-Munroe, Smutzler, and Sandin, 1997). Mothers struggling with PTSD have difficulties in

managing their children who have increased risks of developing emotional and behavioural problems resulting in mothers using harsh or physical aggressive parenting strategies (Katz & Gurtovenko, 2015).

According to some of the participants, mothers were depressed and looked sad most of the time. Evidence from previous studies indicates that mothers who have been through IPV suffer higher levels of depression when compared to their non-abused counterparts (Howard, Oram, Galley, Trevillion & Feder, 2013). This then impacts on their everyday lives and their mothering experiences making it difficult for them to read their children's cues, causing them to be numb and emotionally distant toward their children (Lapierre et al., 2018; Weisberg, 2018). In the WHO multi-country study of IPV conducted by Garcia-Morena et al. (2005), there were reports that emotional distress was significantly higher among women who had experienced IPV. Research by Ruiz-Perez and Plazaola-Castano (2005) suggests that mothers who experience psychological abuse suffer more from depression and rely more on anti-depressants and tranquilisers. Those who experience physical abuse were reported to have poor physical health. Participants disclosed that their mothers had experienced all types of IPV and had appeared to be emotionally distressed.

Stressed mothers have diminished parenting capabilities with some of them being very punitive towards their children and likely to be harsh, controlling and negative when interacting with their children (Lovejoy, Graczyk, O'Hare and Neumann, 2002). Mothers struggling with depression and maternal stress were more emotionally insensitive and unsupportive, withdrawn and aggressive which could have a negative impact on their children's development (DeVoe & Smith, 2002). The participants in the current study stated that their mothers were withdrawn, disengaged and very unhappy most of the time hence they found it difficult to approach them when in need.

### **Poor physical health and on mother's parenting**

In addition to the impact on mothers' emotional and mental health, IPV can have a significant impact on the mother's physical health. A number of participants indicated that their mothers struggled with physical health issues like having constant headaches which impacted on the way they interacted with their children. One of the mothers struggled to sleep which caused anxiety for her and she neglected her children's needs and became a compulsive cleaner which made the children feel abandoned and having to take on parental roles to protect and provide for themselves. Campbell (2002) states that IPV is a direct source of severe and chronic health problems as a result of injuries, stress and fear of the abuser in an IPV environment. Various studies conducted with IPV victims in health care settings documented health issues like physical injuries, chronic back pain, headaches as well as mental health (Campbell, 2002; Campbell, Garcia-Moreno & Sharps, 2004; Garcia-Moreno et al., 2005), which had an impact on the mother's wellbeing and her parenting capacity as she struggled to be fit for her children's needs.

### **Children took on adult roles**

IPV placed a lot of responsibility on the children exposed to it. When children realised that their mothers were not able to protect them, they took it upon themselves to protect themselves and their siblings resulting in role reversal between the mothers and the children. Some of the participants explained that their mothers discussed the violence with them and sought comfort from them instead of her being emotionally present to them. According to Velasquez, Arellano and McNeill (2004), older children growing up in violent environments tended to take on parental roles and whereby they would protect their siblings as well as their mothers experiencing violence. Four of the participants in this study, stated that their mothers were unable to stop the violence and one of them reported that his brother

had tried to intervene when their parents were fighting and had been hurt in the process. This is consistent with previous research which indicated that children react in various ways to the IPV with some trying to intervene to stop the violence from occurring (Buckley, Holt & Wheelan, 2007; Mullender et al., 2002; Osofsky, 2003). The participants provided emotional comfort and support to their abused mothers. This resonates with research conducted by Little & Kantor (2007) who suggests that in some circumstance's mothers may become needy so much that they rely on their children to undertake houses chores, for support, advice and comfort after and during the abuse. In this study one of the participants stated she had to take on the role of caring for her siblings as her mother could not take care of them or protect them from the father's violence. This indicates that the participant's mother could not fulfil her role. The participant had to take on the parental role and provide support to her siblings and her mother. The mother-child relationship was affected when children assumed a parenting role.

**Objective 2: To understand the mother-child relationship from the perspective of adult children who were parented by a mother experiencing intimate partner violence (IPV).**

### **Disrupted mother -child relationship**

The participants consistently stated that they had difficult relationships with their mothers because of the environment they were living in. This was supported by findings from previous studies which indicate that IPV has an impact on the mother-child relationships as the abusers normally tries to undermine mothers parenting and parenting styles which might lead to children being confused about who to trust in the home (Beeble, Bybee & Sullivan, 2007). Participants struggled to build a good relationship with their mothers as their mothers found it difficult to be emotional present to their needs. This led to the participants blaming their mothers seeing them as weak, childlike and emotionally drained so much that they struggled to find her as supportive. In the same vein, findings from a study conducted with

African and Latino children revealed that the children had felt let down by their mothers and struggled to understand how they could have remained with their father who was violent for a long time (Aymer, 2008).

The relationship between mothers and children deteriorated because, mothers in an effort to protect their children, did not talk about the IPV but this only made their children blame them more (Moulding, Buchanan & Wendt, 2015). Mothers did not communicate freely their reasons for not discussing the violence more openly with their children which also made the children reluctant to initiate any such discussion with their mother as they did not want to make her angry or sad (Humphreys et al, 2006). The mother-children relationship was impacted because the mothers had no support from their partners. According to Letourneau et al. (2001), maternal social supports are important in building relationships between parents and their children as they listen to their children and encourage them in the context of IPV. Participants disclosed how they felt they were not listened to and were often not encouraged or comforted and this had impacted on their relationship with their mothers. Mothers in this study, relied instead on their children for support and advice and this put a strain on mother-child relationships.

However, not all participants had a difficult relationship with their mothers as some had managed to remain close to them. Lapierre (2008) conducted a study which demonstrated that despite challenges faced by mothers and children growing up in violent environments, children still considered their mothers as very significant people in their lives. A few factors were identified as important in building a close relationship between the mothers and their children and these included communication (Lapierre et al., 2018). Communication or talking about the violence experienced might sometimes be difficult to do resulting in resentment in both children and mothers but when mothers are able to explain and console children this result in improved relationships. Participants whose mothers tried to talk to them about the

abuse and comfort them had a good relationship with their mothers. Where mothers had not discussed or comforted their children, children formed their own thoughts and feelings which worked against building a good relationship. Comforting and talking to children may help to counter the mother-blame and feelings of betrayal and unrealistic parenting capabilities (Wendt et al, 2015).

**Objective 3: To examine how the mother's parenting style was affected by the IPV.**

### **Impact on the mother's parenting style**

This study indicated that IPV had an impact on mother's parenting style. Some mothers were described by their adult children as being harsh and using corporal punishment when children were misbehaving. Similarly, Hazen et al. (2006) conducted a longitudinal study where they examined the relationship between mother's experiences of IPV and their child behaviours in children aged between 4 and 14 years old. They concluded that IPV was associated with children developing challenging behaviours and that this was exacerbated by their mother's parenting styles which included corporal punishment and psychological aggression. In the current study, several of the participants identified that their mothers would shout at them and physically discipline them. Participants described their mothers as strict. Baurimand (1991) describes this as an authoritarian parenting style where mothers give orders and expect their children to be obey without asking questions and parents using punitive measures to have those children following their orders.

One of the participants identified that his mother seemed detached from the family and went about her daily duties and was always busy. This kind of parenting had contributed to the participant's negative relationship with his mother as she appeared unresponsive to her children's needs. According to Baurimand (1991), this type of parenting is called uninvolved or neglecting as mother was disengaged towards her children and was neither demanding nor

responsive to their needs. The participants' view of their mothers' parenting styles indicated that the IPV had impacted on the way their mothers dealt with and provided for their children. Letourneau et al. (2001) attributed this to mothers having so many competing demands that disciplining her children was not a priority for them.

### **Positive parenting during IPV**

In agreement with some of the scholars who have conducted studies on the impact of IPV on the mothers' parenting the findings in this study suggested that their mothers parenting had not been all negative (Radford & Hester, 2001). In this study, participants identified some instances where their mothers were loving, caring and spent time with them. Mothers experiencing IPV were found to actually compensate for their children's exposure to IPV by being more attentive and sensitive to them (Letourneau et al., 2007). Similarly, Haight et al. (2007) suggest that mothers parenting in an IPV environment showed love and care to their children by providing assurance, hugging them and providing positive conflict resolution skills. In the same instance, mothers had developed strategies for protecting their children which included telling them to go to their neighbours or extended family members when fathers became violent (Letourneau et al., 2007). Other strategies included talking to affected children about IPV and some mothers minimising the violence so as not to traumatise their children further. One participant in this study stated that his mother had explained that his father was under a lot of stress since moving to Australia. These strategies may be viewed as having effects on parenting in that the mothers had used other "resources to respond to the violence on behalf of their children". Levendosky et al., 2000, p. 266).

Although mothers of the participants in this study were going through a hard time themselves, they made time to spend with their children and were often described by the participants as a source of support and comfort. This resonates with some studies which indicated that even though experiencing IPV could directly affect the mother's wellbeing, it

did not necessarily mean negative mothering practices (Aymer, 2008; McDonald-Harker, 2016; Mullender et al., 2002). The participants explained how their mothers would take them out of the violent environment by taking them to their local playgrounds or shopping so that they were out of that situation even if it was for a short time as a way of compensating for the violence they had been exposed to. Some of the participants' perspectives were that although their mothers were abused, they still managed to be there for them.

### **Summary**

The findings indicate that IPV has a significant impact on the mother's parenting, her relationship with her children and her parenting style. This chapter focused on the interviews conducted with the six adult children who had grown up in IPV environment. A relationship was established between the data and the literature and it was clear that IPV had an impact on the mothers parenting as they were perceived as unprotective by their children. The chapter also considered the other factors that made the effects of IPV more pronounced for mothers such as social isolation, language barrier and cultural influence as some mothers had recently migrated to Australia and were not familiar with services available to them and some were afraid of breaking their cultural beliefs. These results were similar to and added to the past literature about the impact of IPV. It is hoped that the current research will elicit more programs and improve on practices and public awareness of the impact on IPV on mothers' parenting. The following chapter will present the conclusions from the study and consider the implications of the findings to the practice, policy and programs for working with mothers parenting in IPV. The chapter will also state recommendations for further research.

## Chapter 6: Conclusion

There are many forms of violence against women, but intimate partner violence is a gendered form of violence that specifically affects both mother and the child in different ways (Kelly & Johnson, 2008; WHO, 2013). This study's aim was to explore adult children's perspectives on how IPV perpetrated against their mothers affected her parenting. The study set out to achieve the following objectives:

1. To investigate how parenting in the context of IPV impacted the mothers' ability to meet their children's needs.
2. To understand the mother-child relationship from the perspective of adult children who were parented by a mother experiencing intimate partner violence (IPV).
3. To examine how the mother's parenting style was affected by the IPV.

This concluding chapter relates the findings of this study to the research objectives and considers the contribution they can make to social work practice as well as parenting programs and policies. The chapter also highlights the key conclusions and implications for future research. The chapter will be divided into five different sections. The first section will briefly review the methodology and rationale for the research and the choice of the theoretical framework. The second section will summarise the key findings from this research, addressing the research objectives. The third section will discuss the contributions made by the study and the fourth will examine the implications of the research to the policies, practice and parenting programs related to mothers parenting in the context of IPV. Finally, the chapter will outline recommendations for future studies.

## **Methodology**

This research drew on a qualitative methodology to explore adult children's perspectives on their mothers parenting in the context of IPV. The aim of using the qualitative methodology was to uncover and capture the lived experiences of children who grew up in this environment. Qualitative methodology was found to be suitable for building an interpersonal, mutual collaboration with participants as it encouraged them to reveal their stories of their lived experiences and captured their diverse perspectives (Ezzy, 2002). The interpretive approach which aligns well with qualitative methodology helped the researcher to focus on the language, signs and meaning ascribed by the participants on their exposure to IPV (Shaw & Holland, 2014) and how IPV had impacted on their mothers parenting. In interpretivist approach interviews are used to collect data to understand the participants experiences (Shaw & Holland, 2014). Semi-structured interviews were conducted with six adult children who grew up in an IPV environment and were able to discuss their lived experiences (Smith & Osborn, 2015) and their perspectives of their mothers' parenting. This methodology afforded the participants the opportunity to express their feelings and thoughts the way they saw fit and without any alterations (Creswell, 2013). The study intended to discover if the participants were aware of the changes in their mother's parenting. Selected themes were then identified, and thematic analysis used to analyse the data (Braun & Clarke, 2006).

## **Theoretical framework**

To better analyse the mother's parenting, this study conducted with adult children who grew up in the context of IPV in Australia, used feminist theory which assumes that IPV is a result of male oppression of women within a patriarchal system in which men are the primary perpetrators and women and children are the victims (Dobash & Dobash, 1979;

Walker 1979). The Australian prevalence surveys indicated that more women with children experienced IPV than males (ABS, 2017; Mouzos and Makkai, 2004). With this view, this research utilised feminist theory whose understanding of IPV is that it is a gendered power and control exerted by men on women (Phillips & Guthrie, 2019). Patriarchy helped clarify that in some societies males are still considered as dominant over women and children which results in them being silent about their oppression and discrimination (Abbott, Tyler and Wallace, 2006).

IPV affects all cultures and Australia is considered as one of the world's most multicultural country (Ghafournia, 2011); women and children from diverse communities are thus impacted by IPV. Women from diverse communities who are victims of IPV face multiple barriers which are both systematic as well as cultural which may limit their ability to seek and afford support available to them (Allimant & Ostapiej-Piatkowski, 2011). These barriers may include financial dependence on their partners, limited English language skills, being unaware of their rights and the belief in some cultures that violence is the right of the husbands as head of the family (Dedeigbo & Cocodia, 2016). This study therefore also considered an intersectionality framework which highlighted the importance of the contribution of race/ethnicity, sexual orientation, language, and religion in understanding the violence against mothers (Benson & Fox, 2004). The findings reminded us that any analysis of IPV that ignores intersectionality will be incomplete and lacking in depth as mothers were not only faced with the violence but other factors that created overlapping and co-dependent systems which enhanced their disadvantages (Family Safety Victoria, [FSV] 2018). The intersectionality approach suggests that one should not understand these mothers' different identities as those that increase their burdens but rather view those differences as helping understanding of their unique experiences (Morris & Bunjun, 2007). Morris and Bunjun (2007) concluded that the ongoing challenge when using the intersectionality framework was

how one explained the socially agreed identities which were already linked to social and economic consequences in society without stereotyping or making generalised conclusions. In so saying, this helped in understanding the barriers the mothers were facing in the context of IPV and how this impacted on their parenting.

According to the Australian Bureau of Statistics (2016), Australia is considered one of the most diverse countries in the world with 49% of its population said to be born overseas or having one or both parents being born overseas. The participants for this research reflected this multiculturalism as four of them had parents who had had migrated to Australia while they were still young. Three of them identified that their mothers had limited English language which meant they struggled to communicate with other people who could have assisted them, and hence had no knowledge of the Australian laws. They were also isolated from their cultural communities and some of their cultures frowned upon separation, divorce and disclosures of IPV which was seen as a private matter (Ghafournia & Eastal, 2018). According to FSV, intersectionality helps to “understand the way privilege, power and oppression influence to include or exclude and how they shape an individual’s sense of power, resilience and wellbeing.” (FSV, 2018, p. 16). Using feminist theory, patriarchy and intersectionality framework assisted in understanding the different explanations of how oppressing mothers in IPV affected the mothers’ parenting and helped not to blame the mothers when they were perceived by their adult children as being unprotective.

### **Key findings**

The findings from this research have been consistent with those of the previous studies as they indicated that mothers who experienced IPV had their parenting compromised (Levendosky & Graham-Bermann, 2000; 2001; Levendosky et al., 2006). The participants perceived their mothers as being unprotective as they let them be exposed to the violence.

They explained how their mothers did not stop their fathers from hitting both the mother and the children. In general, the IPV caused their mothers to project their own anger towards their children and become punitive and neglectful (Stephen, 1999). The participants were also able to identify reasons why their mothers could not leave the abusive fathers citing factors like isolation, language barriers, children being too young and financial stress. Ghafournia (2011) explains that mothers who had migrated to a new country were most likely to remain with an abusive father because they might be economically dependent on him or they may not have the language and work-related skills that would see them employed when they leave that relationship especially if they were new to a country.

The findings indicated that the mothers were emotionally drained which was consistent with Holden's (2003) conclusions that mothers experiencing IPV suffer from depression and maternal stress resulting in mothers being emotionally distant, having no energy or time to spend with their children. Some of the participants stated that their mothers were often crying and unhappy corresponding with the study conducted by Holtzworth-Munroe, Smutzler and Sandin (1997) which estimated that most mothers experiencing IPV suffer from post-traumatic stress disorder, low self-esteem, depression and anxiety. The other factor that contributed to the mother's depression and anxiety was lack of social support (Levendosky et al., 2004).

Participants in this study stated that their mothers did not have many friends and did not have extended family they could rely on. One of the fathers stopped the family from attending their cultural events and if he allowed them to go, he would go along with them. Another participant identified that her family moved their locations quite a lot and therefore her mother had no close friends. According to Carline and Eastal (2014), these factors can exacerbate mothers' isolation as it may limit her social interactions. Levendosky et al., (2004) explained that mothers experiencing IPV therefore lacked the means to offer or receive

emotional support and as a consequence they remained in these relationships which impacted on their wellbeing.

The adult children also indicated that because they could not rely on their mothers for protection, they had to take on parenting roles themselves. Children in this situation, according to previous research, often protect their mothers by intervening when their fathers become physically abusive towards her (Buckley et al., 2007; Osofsky, 2003). Mothers had no other support and so took their children into their confidence and spoke to them about the violence and how they hoped their father would change his violent behaviour. Taking on the parenting role had an impact on the mother-child relationship as the children felt they had to protect their mothers instead of the other way around.

The mother-child relationship is important for the wellbeing of children who rely on their mothers for support, comfort and safety. This relationship however can be impacted when mothers parent in the context of IPV where they have to constantly consider their own safety and that of their children which can lead to them being exhausted and with little energy to devote to their children (McDonald-Harker, 2016). In this study, the findings indicated that the IPV had negatively affected their mother's relationship with their children as they reported that their mothers were verbally abusive towards them and had shown less maternal affection. This had resulted in some of the participants leaving their home as soon as they could. Some of the participants had blamed their mothers for remaining with their abusive father for too long which was similar to Mullender et al.'s (2002) findings.

The participants' experiences concurred with the previous research findings which indicated that mothers who had experienced IPV had harsh parenting skills. This research indicated that the IPV impacted on mothers' abilities to develop authority and control over their children and resulted in them being physically aggressive towards them. Mullender et al,

(2002) explained that mothers experiencing violence may resort to these parenting strategies to ensure children are well-behaved and avoid infuriating the abuser.

It may be erroneous to assume that all mothers affected by IPV have their parenting capacity affected. This research like others conducted before it, indicated that there was evidence that some mothers made considerable effort to protect their children from the IPV exposure (Levendosky et al., 2000). Mothers often compensated for the violence by being more loving, nurturing and taking their children to the shops and to the playgrounds so as to remove them from the abusive environment even if it was only for a short time. Other scholars have also explained that abused mothers showed more concern for their children and took action to protect them despite the violence in their lives (Haight et al., 2007; Hardesty, Oswald, Khaw, Fonseca, & Chung, 2008; Kelly, 2009; Peled & Gil, 2011). Strategies which included removing the children from the violent environment or telling the children to go to their neighbours' houses and keeping the abuse a secret were some of the tactics used by the mothers to protect their children. Kelly (2009) stated that mothers may not report the abuse to the authorities or their friends as a strategy to protect their children from physical and emotional distress. In addition to protecting their children from the physical abuse, Ghafournia (2011) explained that in Australia, mothers may not report the abuse as they may not be sure about the Australian laws and therefore may not want to be separated from fathers who may be their main source of financial support.

### **Implication for Practice**

The results of this study indicate that IPV has an impact on a mother's parenting, mother-child relationship and her parenting style. The findings helped our understanding of the gendered nature of IPV, the male dominance and control as well as the other factors that might contribute to further oppress mothers and how they parent their children. These

findings therefore have implications on how professionals, including social workers who may have the opportunity to interact with these mothers might offer them support. Social workers could aim to provide easy access to assistance and support for mothers so as to prevent the negative impacts on their parenting and their relationship with their children (Easteal, 1996). Social workers supporting mothers who have experienced IPV could aim to educate them about how to report the IPV and provide them with information of where they could receive help in their own language and according to their culture. This can be done through the use of interpreters if a mother indicates that English is her second language. Through appropriate cultural services, mothers can be educated about IPV and how it impacts on the way they relate with their children. First and foremost, this can be done through raising awareness about how men use power and control over them and what is acceptable and unacceptable in an intimate relationship (Ateah et al., 2016). By so doing Australian mothers experiencing IPV will know that they can talk to someone and that there are services they can contact for support. Having several access and intake points available for those who might have transport issues can also increase the chances of educating more mothers about IPV. The access points can also have the services of interpreters to assist those who have English as their second language, and IPV can be explained and clarified as being unacceptable in all cultures. Community based organisations, charities, local religious authorities and elders in the community can be utilised to educate newly arrived migrants and to provide them with IPV documents and information about their rights if they find themselves as IPV victims (Easteal, 1996). Information about available services can also be disseminated to mothers when they attend their Maternal Child Health Nurse appointments, their doctors or when they pick up their children from school or Child Care Centres.

When working with mothers who have been or are going through IPV social workers should support them by challenging the culture and norms of IPV. Traditional beliefs such as

men have a right to control or discipline their partners should be challenged as they expose women and children to violence (Ilika, 2005). When mothers believe that IPV is acceptable and that a normal partnership is built on male authority, they are not likely to report to police or disclose their experience to any professional working with them as they may fear retribution from their community (Ilika, 2005). This therefore means that practitioners, including social workers working with these mothers have to create public awareness and develop programs that will empower and equip them with appropriate skills of dealing with IPV (Anderson & Ee, 2018).

IPV places a lot of stress and complications on mother's mothering therefore it is important that when social workers and other practitioners are working with these mothers they are not and should not be made to feel as if they are being blamed or that they are being viewed as "unprotective" but must reinforce gender power relations within their mothering discourse (Wendt et al., 2015). The focus should be placed on the abusers' actions who should be held accountable for their actions and the part they play in their children's development. This can be done though having parenting programs for mothers and fathers separately. Fathers have to be aware of their abusive behaviours on mothers and how this affects the mothers' parenting and caring for their children. Access to supports that will help fathers develop healthy behaviours towards mothers and children should be easily available (Kaspiew & Australia's National Research Organisation for Women's Safety Ltd, 2017). Easteal (1996) corroborates this by explaining that fathers 'cultural beliefs need to be challenged and they be informed that there will be no excuse given to justify their abusive behaviours and held responsible for their actions.

The different strategies employed by mothers to protect their children and the fact that they continue providing for their children in this IPV environment highlights their strengths and motivation. Doing their mothering role in an unpredictable situation should

therefore be complimented (Nixon et al., 2017). The challenge for social workers and practitioners is to appreciate mothers' efforts and at the same time expose the power and control used by the abuser as well as acknowledging the intersections faced by these mothers which only helps to further discriminate and disempower them (Ghafournia & Easteal, 2018). This can be done through ensuring that all mothers are treated equally, and their voices heard at all times through connecting them with the school community, for example, since fathers are less likely to be controlling them if they are not aware of the meetings they are attending (Nixon et al., 2017).

Making a conclusion that all mothers who have been victims of IPV have difficulties with their parenting is stigmatising and may, according to Ateah et al. (2016), result in using inappropriate and intrusive interventions which in the most extreme form may include removing the children from their mother's care when it is not necessary. The responses used when working with these mothers could be informed by the fact that mothering in this setting may be challenging and made complicated by a number of other factors but also realising that not all mothers in this environment may need parenting support (Ateah et al., 2016). The practice should at least focus on the mother's strengths and in supporting them with their relationship with their children (Edleson, Mbilinyi & Shetty, 2003). Instead of focusing on mother's parenting in this IPV environment, more focus should be on how to prevent IPV, addressing the source of the violence, putting more supports and services for mothers and protecting them from abuse (Ateah et al., 2016). It is important to note that motherhood gives women part of their identity and helps them heal and cope better with their experiences of abuse but devaluing their mothering and identifying them inadequate parents removes that source of strength (Nixon et al., 2017). When working with mothers, social workers and practitioners could include them in the interventions by asking them the different ways they

have been able to protect their children as this sends an important message that they are seen as protective and this can be empowering to them (Stark, 2002).

The mother-child relationship is seen as an important factor in building resilience and wellbeing in children experiencing IPV and helps in protecting children from negative outcomes (Sturge-Apple et al., 2010). The findings in this study indicated that mothers did not always effectively communicate with their children which then impacted on their relationship. These findings indicate that when working with mothers who have been through IPV social workers may have to work with them towards repairing those relationships with their children through encouraging them to genuinely communicate with their children and have mothers sharing their emotions to help their children heal (Goldblatt, Buchbinder & Cohen, 2014). This is important because children want to be listened to and wished to be informed about what was going on from their mothers (Mullender et al., 2002). Children want to be informed and to take part in protecting their mothers. This can be a complex mission but when assessing, planning and implementing interventions with mothers and children social workers can be open to facing the challenges confronted by these people and use specialist therapeutic interventions to help them deal with the trauma they had experienced (Goldblatt et al., 2014; Humphreys, Thiara & Skamballis, 2011). The practitioner needs to encourage mothers to have open communication with their children and explain to them that talking about the IPV incident with their children may help to build the mother child relationship as well as help each other cope with the situation (Pels, van Rooji & Distelbrink, 2015). Hooker, Kaspiew & Taft (2016) stated that there were a variety of interventions that could be used to build or support the mother-child relationship especially those affected by IPV where psycho-therapeutic treatment models based on trauma may be used.

However, it is also important to note that not all mother-child relationships are damaged by IPV (Radford & Hester, 2006) because mothers and children may draw strength from each other and be able to develop protective strategies together (Peled & Gil, 2011). The most significant issue for practitioners to consider when working with mothers parenting in the context of IPV and their children is to recognise that recovery is possible and that relationships are open to change and fluidity (Humphrey's et al., 2006).

In this study the participants indicated their mothers had multiple intersecting factors that influenced their needs and they appeared to struggle to communicate their needs because of language barrier, isolation from their ethnic communities resulting in them depending on the only support available to them, the fathers. Therefore, when looking at services that would be appropriate to mothers one has to look for services tailored to their unique needs, for example, some of the reasons for not leaving the abusive partner was lack of financial support (Kim & Gray, 2008). Interventions therefore may need to include advocacy, provision of accommodation and linking with financial assistance programs that will help the mothers to achieve economic independence from their abusive partners and be able to provide their children with the basic needs (Greeson et al., 2014). The services working with these mothers could also be adequately resourced to be able to offer them immediate financial aid like supermarket vouchers as well as ensuring their immediate safety and wellbeing. La-Combs (2015) also suggests that organisations like schools, health care organisations, and cultural organisations should work together in order to improve services for mothers or families going through IPV.

It is important that all professionals working with IPV clients are able to share information to promote the wellbeing and safety of the children and to facilitate the assessments of risks to children and the mothers (FSV, 2018). Medical staff and teachers may be trained to use a Common Risk Assessment Framework (CRAF) that helps with the

screening of victims for their safety and then be able to share information this information when they seek support for them. CRAF assessment may help in recognising and talking to mothers about the violence they may be going through and to encourage them to seek help. The aim is to empower the victims of IPV so that they can seek support to enhance their safety and that of their children.

### **Programs for the mothers parenting in the context of IPV**

Mothers who have been through IPV or who are still experiencing IPV need programs that would help them cope with the stress and help them feel supported. Letourneau et al, (2011), suggested responsive integrated programs that would focus on the mothers' parenting and their relationships with their children. Investment must be made in developing parenting programmes that would strengthen the mother-child relationship and help the mothers improve their understanding of their children's emotional and physical needs (Mc-Gilloway et al, 2012; Peled & Gil, 2011).

Given that one of the findings of this study was that IPV had an impact on the mother's emotional state it would be good for the mothers to be able to do strength-based intervention programs that would support and help them to parent effectively by providing them with information on how IPV affects their children and how they should react to their children's challenging behaviours (DeBoard-Lucas and Grych, 2011). Shim and Haight (2006) suggests that these could be offered as parenting courses and not focus on the mother's parenting deficit but as a support stance.

### **Policies**

Legislative reforms are currently underway in Australia to address some concerns brought about by IPV. Individual Australian states are considering a range of reform options on how to prevent and reduce IPV as it has devastating impact on the mothers and children

going through it (Phillips & Guthrie, 2019). It is fair to acknowledge the work done by the Victorian government who acknowledged the harm and impact of family violence among families and saw the need to invest in family violence reforms to ensure the future safety and wellbeing of all Victorians and established the Royal Commission into Family Violence (RCFV) in 2015 (Neave et al., 2016). Following the RCFV recommendations, Support and Safety hubs have been established in safe locations which are easily accessible to people experiencing IPV. These Support and Safety hubs are equipped to assist mothers and children who are ready to leave their abusive environment and make it possible for them to be linked in specialist family violence services. Perpetrators are held accountable through including criminal sanctions and mandatory Men Behavioural change program attendance so that they are aware of the impacts of their behaviours (Neave et al., 2016). The hubs also offer support to families in need of help in the care and development of their children through linking them with Integrated Family Services who offer ongoing parenting support. This will be helpful to mothers who have parented through IPV. The Victorian Government in Australia has worked on some policies to support IPV victims, but there still remains the fact that there are inadequate funds to establish family services in all parts of Victoria, for example, to support mothers and children going through IPV. Policies should be put in place to support mothers who have children who still have contact with the fathers. In some cases, mothers are required to supervise contact between the father and the children which can further traumatise both the mother and her children. Clear boundaries and outcomes must be made through the courts on forbidding such contacts to occur until the father has proven to have changed his behaviour and until he has completed his mandatory programs and has had further assessment. Policies need to change on how the breach of intervention orders are managed. In Victoria, it is upon the mother to prove that the father has breached the intervention order. The mother has to collect all the evidence which at times is not admissible in court.

## **Contribution to the research**

This research makes a notable contribution to current knowledge in that it builds on the knowledge on mother's experiencing IPV and how IPV makes parenting difficult as it affects the way she attends to her children (Radford & Hester, 2006). At a theoretical level, this contribution can be located within feminism and looking specifically at intersectionality (Crenshaw, 1991). Furthermore, this study appears to have been the first in Australia, to focus on the mothers parenting through the eyes of the older children who grew up in an IPV environment after the one conducted by Mullender et al., (2002) where they conducted a study with children aged between 8 and 16 years old.

## **Recommendations for future research**

Mothering in the context of IPV can be made difficult by being in a new country and a new environment that has different cultures and where mothers may lack social networks. From this research there is an identified need to explore in detail the experiences of mothering in the context of IPV for new immigrant families and mothers in same sex relationships so that other aspects of intersectionality are considered. This study was conducted with adult children who had grown up observing their mothers parenting in this challenging situation, it may be helpful to look how these adult children are parenting their own children. Consideration should also be given to conducting the same research with adult children but focusing on their fathers' parenting style in that environment. A study should also be conducted on the fathers who were abused by the mothers and look at how that had impacted on the father and his relationship with his children.

## **Summary**

This study has highlighted the impact of IPV on mothers parenting, parenting style and their relationship with their children. The participants indicated that IPV had impacted on

their mothers parenting as she had been unable to offer them comfort and to be emotionally present to their needs. Some mothers had been too physically sick to attend to their children. Children had taken on parenting role to support their mothers and had been protective towards their siblings. The IPV had impacted on mother-child relationship. Although their mother had often used punitive parenting styles, the participants still found some positives in their mothers parenting as they stated that she had taken them to the park and had gone shopping with them to remove them from the IPV situation. The findings also highlighted the fact that some mothers were faced with more than IPV as they were new to Australia and had struggled with language barrier and conforming to their culture when it came to IPV. Feminist theory and intersectionality theory assisted in highlighting the power and control used by fathers against mothers and help cement the idea that IPV is gender-based violence. Findings also clarified that any IPV analysis that ignores ethnicity, culture and language issues will be incomplete (Resko, 2007).

### **Researcher's reflection**

When I started this research, I had an understanding that IPV had an impact on mothers' parenting but what I did not anticipate was how much the children could tell about their mothers' parenting in that context. The research findings indicated to me that children are aware of their mothers' struggle and they are aware that IPV is not acceptable as some of the participants explained that they asked their fathers about his behaviour and that their fathers had denied any wrong doing. Talking to these participants reflected how hurt and affected these children were about this violence as they had taken it upon themselves to protect themselves or their siblings as well as their mothers.

As stated in the first chapter, I come from an African culture that accepts violence against women as the men are viewed as the head of the family who can discipline his

household (Chuma & Chazovachii, 2012). The findings of this chapter prompted me to think about how much damage is going on for children who grow up in that environment where their mothers have no support. This research influenced my understanding of patriarchy, as fathers had used their social and economic control over mothers and through perpetrating IPV had exerted their power over mothers and brought them into submission (Chireshe, 2015). Mothers in this research relied on their abusers for support, language skills and some came from cultures that did not support separation and so they had remained in this environment not knowing how to support and protect their children.

This research made me appreciate the mothers parenting in the context of IPV as they have a lot of challenges and yet are still expected to fulfil their mothering role.

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## APPENDIX A

### Semi-Structured Interview sample questions

1. Could you start by helping me get to know your family, its composition, how many were you, where you lived and so on?
2. What is your first memory that things were not going on well at home between your parents?
3. Tell me a little bit about your memory of your mother before the family violence started? If you can remember about back, then.
4. Could you describe your experience of being exposed to and **growing up with intimate partner violence?**
5. What changes did you notice with your mother? Was she able to spend time with you?
6. What was she like to live with during that time?
7. Could you tell me a little more about how things were between you and your mum back then? Did you feel you could talk to your mother at all?
8. Thinking back about the abuse that was going on at home, how do you think this affected the relationship between you and your mum at the time?
9. Can you give some examples of how the abuse affected her parenting during different stages of your growing up years?
10. What did your mother do to support you during this time?
11. How did you feel towards your mum when all that was going on?
12. Was it ever possible for you and your mum to talk to each other about what was going on back then?
13. If you could pick three words to describe your mum, what would they be?

## APPENDIX B



MASSEY UNIVERSITY  
COLLEGE OF HEALTH  
TE KURA HAUORA TANGATA

### **Letter to different services requesting to advertise for research participants.**

**Anglicare Victoria  
Victoria 3978**

Dear Program Manager

My name is Noreen Masiyane. I am writing to request permission to advertise for participants for my research study at your organisation. I am currently enrolled in the Master of Social Work program at Massey University, New Zealand and am in the process of writing my master's thesis. The title of my research is "THE EFFECT OF INTIMATE PARTNER VIOLENCE ON THE MOTHER'S PARENTING: ADULT CHILDREN'S VIEWS". The aim of my research is to understand the mother-child relationship from the perspectives of adult children who were parented by a mother experiencing intimate partner violence and to investigate how parenting in the context of intimate partner violence impacted the mother's ability to meet her children's needs.

To achieve these aims I would like to interview people aged between 18-45 years who grew up in an intimate partner violence environment. I have provided the information sheet to help explain what the research entails in more detail. Your organisation has different programs for people affected by IPV and am therefore asking for permission to advertise for my research participants.

Participation will be purely on voluntary basis and the risks to your services will be minimised in that pseudonyms will be used for all the participants and there will be no mention of your service/organisation as this research is not about the services offered to them but about their mother's past experiences of intimate partner violence. The safety and wellbeing of everyone involved will remain the main priority throughout their involvement. If, however, there is a need for support services required by the participants after their participation they will be referred to counsellors. Please free to contact me if you have further questions about my research.

Thank you for considering my request.

Kind regards

Noreen Masiyane

Noreen Masiyane- [REDACTED]

## APPENDIX C

### Advertisement for recruitment



**Did your mother experience violence from her partner?  
Do you remember how this affected your mother's parenting of you and your siblings?  
Care to share your experiences?**

My name is Noreen Masiyane. I am doing my Master of Social Work degree through Massey University in New Zealand. I currently work with families affected by violence in a relationship and have children living with them.

I would like to invite adult children who grew up in an environment where there was domestic violence to participate in my research study to share and talk about how abuse towards their mother affected her parenting.

I am looking for young adults aged between 18-45 years who:

1. Were parented by a mother who was subjected to intimate partner violence perpetrated against her;
2. Are currently not in an abusive relationship and not living with a parent who perpetrated the violence;
3. Live in Melbourne; and
4. Have received support for their exposure to the violence.

**What does the research involve?**

We will discuss your experience of being parented by mothers who were subject to intimate partner violence. I am interested in your observations and views to help come up with better ways of working with parents in the context of domestic violence.

You will receive a **\$30 Westfield gift voucher or cash** as a gesture of appreciation for your time and willingness to participate in a confidential interview.

## APPENDIX D



MASSEY UNIVERSITY  
COLLEGE OF HEALTH  
TE KURA HAUORA TANGATA

### Participant Information Sheet

#### Information Sheet

#### **The effect of Intimate partner violence on the mother's parenting: Adult children's views**

My name is Noreen Masiyane. I am a Master of Social Work student at Massey University, New Zealand. I live in Australia (Melbourne) and have been working with mothers and children affected by domestic violence in Melbourne for the past five years. I am interested in finding out how mothers' parenting is affected by the violence. I am inviting you to take part in a research that I am doing which looks at young people who grew up in an environment where there was intimate partner violence (IPV). The research aim is to look at the adult children's perspectives of the effect of the IPV on their mother's parenting and parenting styles.

I am looking for six participants as I want to have a deeper conversation with them about their experiences to help come up with better ways of working with mothers and children who are currently seeking parenting support because of the impact of IPV. The information collected will also contribute to improving programs that would help young people cope with their childhood experiences.

#### **People required**

Young adults aged between 18-45 years who:

- Were parented by a mother who was subjected to intimate partner violence perpetrated against her;
- Are currently not in an abusive relationship and are not living with a parent who perpetrated the violence;
- Reside in Melbourne; and
- Have received support for their exposure to the violence.

The participants will each receive a \$30 gift voucher (or as agreed) as a gesture of appreciation for their time and willingness to share their stories and experiences.

#### **Project procedures**

If you consent to take part in this research, you will be requested to meet with the researcher to complete a one to two hours interview at a location chosen by yourself for your safety and convenience. The interview will be audio recorded on a digital recorder so that the conversation can be transcribed. You will be given the transcripts to ensure that what has been transcribed is exactly what you had said, and you will have the opportunity to add and clarify your statement if necessary.

We will have a conversation about the abuse you witnessed as a child. Some questions might be sensitive as they will require you to recall unpleasant experiences. You are free to refuse to answer any questions if you do not want to and to request the researcher to turn off the recorder if you do not want some of the things you say recorded. You are encouraged to inform the researcher if some of the questions make you feel distressed. In the unlikely event that you may require debriefing after the interview, the researcher will be able to make necessary referrals for you to one of the following services for you to access counselors:

1. Family Mediation and Counselling service- 1800 639 523  
(Free of charge)
2. Salvo Care Eastern- Leaving Care program- 62 Playne Street  
Frankston Vic 3199  
Tel: 9781 0188
3. Casey youth Centre: 9792 7279

All the counselling services will be offered free of charge to the people concerned. The researcher will make the initial appointment for the participants who need the support.

### **Data management**

Some extracts of your interview will be included in the written report. However, you will not be identifiable as no names will be used. The audio recordings will be destroyed at the end of the research period. The collected information will be kept in locked cabinet and the laptop used for the research will be password protected. The information will be accessed by the researcher and the supervisors.

If you choose to take part in the research, I will welcome questions at any time, and it is important to note that your participation is voluntary and that you can withdraw from the research at any point before 31 January 2019 with no explanations. At the completion of the research you will be given a summary of the research findings.

### **Your rights**

You are under no obligation to accept this invitation to participate but your assistance will be greatly appreciated. If you decide to participate you have the right to:

1. Be given the full details of the research which will include the research topic and research aims before deciding to take part in the research.
2. Decline to answer any questions that cause you distress.
3. Withdraw from the research at any point during the study (up until 31 January 2019).
4. Ask for the recorder to be turned off at any time during the interview.
5. Ask any questions during the research to help with your understanding.

6. Your confidentiality will be preserved using pseudonyms when collecting the information.
7. Receiving the summary of the research findings.
8. Contact the researcher if you choose to withdraw from the study.
9. Know that I will show excerpts of the transcribed interviews to my supervisors, Dr Tracie Mafileo and Dr Kathryn Hay, however identifying details will be removed to preserve your anonymity.

The thesis will be submitted for examination and deposited in the University library.

Please consider the above information carefully before deciding to participate and ensure you understand your rights as a participant. If you have any questions or would like to receive further information concerning this research, please feel free to contact myself or my supervisors.

### **Project contacts**

Noreen Masiyane                      Phone: [REDACTED]                      Email:  
[Noreen.masiyane.1@uni.massey.ac.nz](mailto:Noreen.masiyane.1@uni.massey.ac.nz)

Dr Tracie Mafileo (Supervisor)                      Email:  
[t.a.mafileo@massey.ac.nz](mailto:t.a.mafileo@massey.ac.nz)

Dr Kathryn Hay (Supervisor)                      Email:  
[k.s.hay@massey.ac.nz](mailto:k.s.hay@massey.ac.nz)

This project has been reviewed and approved by the Massey University Human Ethics Committee: Northern, Application NOR 18/48. If you have any concerns about the conduct of this research, please contact Associate Professor Ajmol Ali (Acting Chair), Massey University Human Ethics Committee: Northern, email [humanethicsnorth@massey.ac.nz](mailto:humanethicsnorth@massey.ac.nz).

## APPENDIX E



**MASSEY UNIVERSITY**  
COLLEGE OF HEALTH  
TE KURA HAUORA TANGATA

### Consent Form

Project Title

**The effect of Intimate partner violence on the mother's parenting: Adult children's views.**

I have read the Information Sheet and have had the details of the study explained to me. My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have my recordings returned to me.

I agree to participate in this study under the conditions set out in the Information Sheet.

**Signature:**

**Date:**

.....

**Full Name - printed**

.....

## APPENDIX F



MASSEY UNIVERSITY  
COLLEGE OF HEALTH  
TE KURA HAUORA TANGATA

### Authority for the Release of Transcripts

**The effect of Intimate partner violence on the mother's parenting: Adult children's views.**

#### AUTHORITY FOR THE RELEASE OF TRANSCRIPTS

I confirm that I have had the opportunity to read and amend the transcript of the interview(s) conducted with me.

I agree that the edited transcript and extracts from this may be used in reports and publications arising from the research.

**Signature:**

**Date:**

.....

**Full Name - printed**

.....

## APPENDIX G



### **MUHEC approval letter**

HoU Review Group

ReviewerGroup  
Dr Kathryn Hay  
Dr Tracie Mafile'o

Researcher: Noreen Masiyane

Title: The effect of Intimate partner violence on the mother's parenting: Adult children's views

Dear Noreen

Thank you for the above application that was considered by the Massey University Human Ethics Committee: Human Ethics Northern Committee at their meeting held on 03/10/2018. On behalf of the Committee I am pleased to advise you that the ethics of your application are approved.

Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested. If the nature, content, location, procedures or personnel of your approved application change, please advise the Secretary of the Committee.

If you wish to print an official copy of this letter, Please logon to RIMS (<http://rims.massey.ac.nz>) , and under the Reporting section, View Reports you will find a link to run the Ethics Committee Report.

Yours sincerely  
Professor Craig Johnson  
Chair, Human Ethics Chairs' Committee and  
Director (Research Ethics)